



Member Handbook

March 2009 Edition

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About NASTAD

Founded in 1992, the National Alliance of State and Territorial AIDS Directors (NASTAD) is a non-profit national association of state health department HIV/AIDS program directors who have programmatic responsibility for administering HIV/AIDS health care, prevention, education, and supportive services programs funded by states and the federal government. Programs administered by members serve every population affected by and infected with HIV. As such, NASTAD has considerable expertise in identifying community needs and responding to the challenges of the HIV epidemic nationwide.

Mission: NASTAD strengthens state and territory-based leadership, expertise, and advocacy and brings them to bear in reducing the incidence of HIV infection and on providing care and support to all who live with HIV/AIDS.

Vision: A world free of HIV/AIDS.

NASTAD is an affiliate of the of State and Territorial Health Officials (ASTHO).

Guiding Principles

NASTAD, our members, and our staff:

- Advocate for public policy and funding to address HIV/AIDS-related issues and correlates
- Utilize evidence-based assessment and decision making
- Produce high quality work that makes a difference
- Serve the needs of NASTAD members
- Foster equity in member representation
- Address the needs of state and local HIV/AIDS programs both within the U.S. and globally
- Include the perspectives of all states and territories
- Support the professional development of members and staff
- Promote diversity in all its dimensions
- Encourage and support the initiative of staff members
- Promote respect for each staff member as a person and as a professional
- Practice transparency in communications and decision making
- Foster collaboration and teamwork, both internally and externally
- Provide one another with direct and honest feedback
- Hold ourselves and each other accountable for results

Membership

NASTAD represents the nation's chief state health agency staff who have programmatic responsibility for administering AIDS health care, prevention, education and supportive service programs funded by state and federal governments. State AIDS Directors in all 50 U.S. states, the District of Columbia, Puerto Rico, the U.S. Virgin Islands, and the U.S. Pacific Islands are represented by NASTAD with an office in Washington, DC.

NASTAD members are the individual(s) with administrative responsibility for HIV/AIDS prevention and care/treatment, including Centers for Disease Control and Prevention (CDC) prevention cooperative agreements and Part B of the Ryan White Program. Increasingly, our members also have STD, viral hepatitis, and surveillance as part of their management portfolio.

Each state or territorial health department is responsible for designating their NASTAD representative. One or two states separate care and prevention representatives, and in these cases, both individuals are invited to participate as full members. (The only limitation is in voting - NASTAD institutes a one state-one vote policy.)

NASTAD operates through a combination of funding sources, including cooperative agreement funding from the federal government, grants from private foundations and corporations, and from member dues. The member dues structure is based on HIV/AIDS disease burden and the amount of federal funds the jurisdiction receives. Member dues are critical to ensuring greater financial independence and flexibility to support activities that cannot be funded from project-specific grants and contracts. While dues are mandatory for membership, they can be waived via a request from a member and participation in NASTAD is not contingent on the payment of dues. We also accept partial payment of dues or payment in installments. (Direct questions or concerns about dues to the Secretary-Treasurer, or to NASTAD Operations.)

Member information is maintained in a NASTAD Member Directory and is included as part of a web-based directory of state HIV/AIDS program staff. In order to facilitate member networking, member phone numbers and email addresses provided to us are publicly accessible via our website and published Member Directory. Members may use a Database Update Form to provide updated member information, as well as information about key program staff for NASTAD to include in its databases (for newsletters) and post in the web-directory of program staff. This Form is accessible online at: .NASTAD.org.

NASTAD members receive many benefits, including regular policy updates and a monthly newsletter, the *NASTAD News*, written and sent exclusively for NASTAD members and their key program staff. For more information, see the *Member Service and Support* section.

Governance Structure

The 20-member Executive Committee (EC) is comprised of state AIDS directors elected by the membership. The EC is charged with making policy and programmatic recommendations to the full membership. The EC is headed by four officers: Chair, Vice Chair, Secretary-Treasurer, and Chair-Elect. The EC meets approximately twice a year, in addition to the Annual Meeting, and engages in bi-monthly conference calls.

How NASTAD's EC Works

- Most of the EC's work is conducted via conference calls held once or twice per month. Calls are held on Thursday from 3:00 to 4:00 pm ET. The Executive Director facilitates the calls.
- Information on calls and other business matters along with supporting documents are shared electronically with EC members. Supporting documents are sent via email at any time prior to the call.
- NASTAD's Executive Director prepares the agenda in consultation with the Chair and sends the agenda to the EC on Monday prior to a Thursday call. On each call, EC members are asked if they have anything to add to the agenda.
- All EC members are encouraged to speak clearly and concisely on conference calls to allow maximum participation of all EC members.
- EC members are welcome to have other staff listen in on the calls with them and/or represent them on the calls when the EC member is not able to participate.
- EC members are also asked to review draft documents and reports and provide comment and feedback in a timely manner.
- Roll call is taken on every call and minutes are taken, reviewed and approved.

All NASTAD members can access the minutes of the Executive Committee on the NASTAD website with their login and password. Navigate to the minutes by clicking on Member Services and the Governance.

Executive Committee and Officer Position Descriptions

Executive Committee Members

- Assist the officers of the Alliance in providing oversight and direction to the Executive Director regarding her/his responsibility for the administration and management of the Alliance.
- Review and approve the annual budget of the Alliance.
- Communicate with NASTAD members about policy issues of importance to the membership.
- Formulate public policy recommendations on behalf of state HIV/AIDS programs consistent with NASTAD's policy for public policy decision making.
- Actively participate and prepare for bi-monthly conference calls, up to four quarterly face-to-face meetings, and the Annual Meeting of the Alliance.
- Participate in NASTAD committees and work groups and may serve as Liaison to the Executive Committee.
- Represent the Alliance in meetings with national and federal partners as requested.
- Participate in strategic planning for the Alliance and oversight of the plan's implementation.
- Mentor new members and encourage their involvement in the work of the organization.
- Share information with and seek input from the NASTAD membership on issues coming before the Executive Committee for consideration.
- Identify and declare any conflicts of interest related to organizational oversight responsibilities.
- Be available to NASTAD staff for advice and consultation on program and policy issues.

Chair

- Presides over the annual meeting of the Alliance and meetings of the Executive Committee.
- Consults with the Executive Director on a regular basis regarding the affairs of the Alliance.
- Develops meeting agendas with the Executive Director.
- Communicates Executive Committee expectations to the Executive Director.
- Conducts the annual performance review of the Executive Director and contract negotiations.
- Convenes the Officers Committee on an as needed basis to consult on Alliance program, policy, and strategic matters.*
- Represents the Alliance in public forums and with federal agencies.
- Assists the Executive Director with member relations and with conflict that may arise among the membership and/or staff.

Vice-Chair

- Serves as Chair in the absence of the Chair or if a vacancy in the office of Chair occurs.
- Participates on the Officers Committee.*

Secretary-Treasurer

- Prepares the minutes of Executive Committee meetings and insures that they are shared with the membership.
- Serves as a member of the Membership Committee and assists the Alliance to keep a current roster of all NASTAD members.
- Chairs the Finance and Audit Committees.
- Reviews and certifies the financial reports provided by staff and accountants and interprets them to the Executive Committee and membership.
- Reviews the financial policies and procedures of the Alliance and ensures compliance with IRS requirements.
- Represent the Alliances at IRS audits or other reviews of the organization's finances.
- Ensures that the annual budget is presented to the Executive Committee for consideration in a timely manner each fiscal year.
- Brings the dues structure to the Finance Committee for review and consideration bi-annually.
- Participates on the Officers Committee. *

Chair-Elect

- Serves as Chair the following year.
- Participates on the Officers Committee.

Past Chair

- Serves as a member of the Executive Committee for the year following their term as Chair.
- Participate on the Officers Committee to provide continuity to decision making and NASTAD planning. *

*** Officers Committee**

- Meets periodically to assist the Chair in developing agendas for meetings and strategies for pursuing goals and objectives.
- Assists the Chair with meeting facilitation.
- Acts on behalf of the Executive Committee during "on-demand" activities that require immediate action between conference calls.
- Communicates with partners and funders on behalf of the Executive Committee when necessary.

Adopted October 2004

Work Groups and Committees

Standing and ad-hoc work groups and committees discuss specific programmatic and management issues in state health department HIV/AIDS and viral hepatitis programs, offer recommendations for consideration by the Executive Committee, advise staff on the development of activities in support of policy priorities set out by NASTAD's Executive Committee, engage in dialogue with federal and partner agencies, and/or assist with the implementation of deliverables through our funded projects and cooperative agreements.

NASTAD's work groups and advisory committees are comprised of AIDS directors or designated senior program staff or non-voting external consultants (former AIDS directors or AIDS program staff) who are interested in working on a particular issue or concern. The work group/committee structure allows for broad participation and collection of diverse perspectives from individuals who are intimately involved in a particular issue.

Work group members participate in conference calls and periodic face-to-face meetings. NASTAD staff generally facilitate these work groups (including the conference calls) and provide overall logistical support. Issues to be addressed in work groups or committees are identified through several mechanisms: the Executive Committee may assign specific issues to be addressed by a work group or committee, NASTAD staff may identify issues for the work group/committee and/or work group/committee members may surface issues to be addressed.

The role of work groups may be any combination of the following:

1. To advise NASTAD staff on the development of activities in support of policy priorities set out by NASTAD's Executive Committee
2. To assist with the implementation of deliverables through our funded projects and cooperative agreements
3. To review and provide direction on development of written materials by NASTAD staff or consultants
4. To bring to the Executive Committee perspectives, concerns and experiences with policy and program implementation and suggested actions or strategies to be taken by the Executive Committee
5. To communicate with federal partners on specific day-to-day implementation questions related to the topic of the committee. Work Groups and committees may bring to the Executive Committee issues that have become stalled in committee and/or on which no progress with federal partners has been achieved. Since they are in a good position to improve the working relationship with federal partners because they are sharing information and working on day to day

issues of concern, NASTAD work groups and committees may communicate and discuss issues directly with federal partners but they are not to convey official NASTAD policies with these partners.

In order to become official NASTAD statements or strategies, recommendations made through work groups or committees must be reviewed and acted upon by NASTAD's Executive Committee.

Executive Committee Liaison

In order to facilitate the relationship between work groups/committees and the Executive Committee, an Executive Committee Liaison will be appointed by the EC to each work group or committee. The role of the EC Liaison is to:

1. Assist NASTAD staff by reviewing agendas for conference calls prior to distribution, paying close attention to the appropriateness of topics and assuring their congruence with the charge and scope of the work group/committee, as well as advising staff leads on decisions such as bringing issues to federal partners and identifying agenda items and work group/committee members to lead discussions with partners, as requested.
2. Assist NASTAD staff with facilitation of calls and/or assigning members to speak on specific topics.
3. Assure that the work groups/committees adhere to NASTAD standards of communication and guiding principles (attached).
4. Bring to the Executive Committee periodic updates on the work group/committee activities and plans for face-to-face meetings, as deemed appropriate and necessary.
5. Bring suggested actions or strategies from the work group/committee to the Executive Committee for consideration. Actions or strategies that must be brought to the EC include policy decisions, re-directions or change in prioritization of staff or financial resources, significant changes in the way a program is implemented, significant changes in programmatic funding levels, and strategies and relationship issues with federal partners.
6. Ensure that any major dissenting perspectives within the work group/committee are shared with the Executive Committee.
7. In addition to the staff lead, be available for other members when they have questions about the work group/committee.



Strategic Map and Strategic Profile

March 2006

Background

The NASTAD Executive Committee (EC) and senior staff held a strategic planning retreat in November 2003. The purpose of this retreat was to set the strategic direction for NASTAD for the next three to five years. A final plan was subsequently approved by the EC. The plan served as a map for activities and in early 2006, the EC determined that an update to the approved plan was necessary. In February 2006, the EC and senior staff met and reviewed a proposed update to the original approved strategic map, developed with input from the entire NASTAD staff. Following the meeting, several additional modifications were made and the updated map was approved by the EC in March 2006.

The following provides a concise overview of the updated strategic map.

Central Challenge

From 2006 through 2008, the central challenge that NASTAD faces is to assert the role of state public health in addressing the HIV/AIDS and viral hepatitis epidemics.

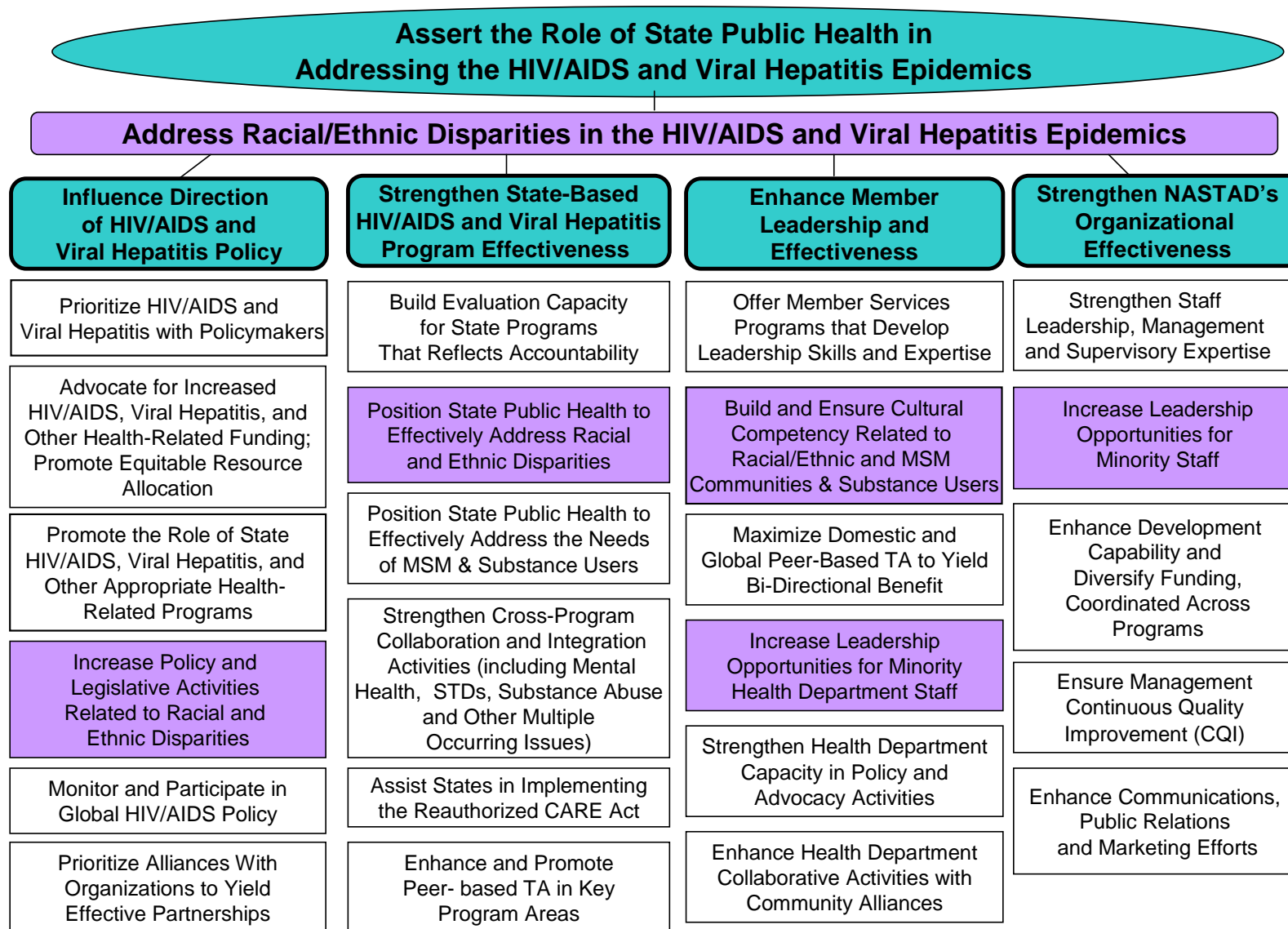
Strategic Priorities

The following strategic priorities have been established in order to meet the central challenge:

- Overarching priority: Address racial/ethnic disparities in the HIV/AIDS and viral hepatitis epidemics
- Influence the direction of HIV/AIDS and viral hepatitis policy
- Strengthen state-based HIV/AIDS and viral hepatitis program effectiveness
- Enhance member leadership and effectiveness
- Strengthen NASTAD's organizational effectiveness

The overall map, along with a rationale for each strategic priority, the supporting objectives, and accountabilities for implementation are spelled out below.

National Alliance of State and Territorial AIDS Directors (NASTAD) – Strategic Map – 2006-2008



Approved March 16, 2006

Overarching Strategic Priority:

Address Racial/Ethnic Disparities in the HIV/AIDS and Viral Hepatitis Epidemics

Rationale

NASTAD's ability to effectively address the complexities of the HIV/AIDS and viral hepatitis epidemics requires confronting the dire statistics surrounding racial and ethnic disparities in the U.S. and abroad. This strategic priority recognizes that overarching all strategic priorities is the need to address racial/ethnic disparities in areas of policy and funding, program, leadership, and organizational effectiveness. It also emphasizes the need for members, staff, committees and work groups to make this both a mindset and an operating principle in all their efforts.

Accountability

NASTAD Executive Director and senior staff, working in conjunction with the Executive Committee

Strategic Priority:

Influence the Direction of HIV/AIDS and Viral Hepatitis Policy

Rationale

NASTAD's effectiveness depends on its ability to use advocacy to influence the direction of national HIV/AIDS and viral hepatitis policy. This strategic priority recognizes the need to advance the states' central role in public health. In the area of funding, NASTAD's advocacy will place particular emphasis on increasing funding for state prevention and care programs for HIV/AIDS and viral hepatitis. Of particular importance is advocating to reduce funding disparities and to promote equitable resource allocation. It also emphasizes the ongoing need to increase policy and legislative activities to reach subpopulations and address cultural diversity and geographic variations, particularly important in the current political environment. Engaging in national policy discussions related to other safety-net programs and insurance reforms that impact persons living with HIV/AIDS and hepatitis is also important. This priority recognizes that NASTAD's effectiveness in policy and advocacy requires strategic alliances within and outside of the AIDS community. As a participant in the U.S. government response to the global pandemic, NASTAD recognizes the importance of engaging in global HIV/AIDS policy where appropriate and strategic.

Objectives

- Prioritize HIV/AIDS and viral hepatitis with policy makers

- Advocate for increased HIV/AIDS, viral hepatitis, and other health-related funding; promote equitable resource allocation
- Promote the role of state HIV/AIDS, viral hepatitis, and other health-related programs
- Increase policy and legislative activities related to racial and ethnic disparities
- Monitor and participate in global HIV/AIDS policy
- Prioritize alliances with organizations to yield effective partnerships

Accountability

NASTAD Executive Director, Director of Government Relations, and other senior staff, working in conjunction with the Executive Committee and other appropriate committees and work groups

Strategic Priority:

Strengthen State-Based HIV/AIDS and Viral Hepatitis Program Effectiveness

Rationale

This strategic priority focuses on NASTAD's role in assisting state HIV/AIDS programs with strengthening their HIV/AIDS and viral hepatitis program effectiveness. This priority recognizes the importance of building evaluation capacity at the state health department that demonstrates program effectiveness and accountability. It positions state public health to continue and build upon its important role in addressing racial and ethnic disparities and populations at increased risk of HIV/AIDS and viral hepatitis infections. It recognizes that addressing the needs of MSM, including MSM of color, and substance users remain exceedingly high priorities. It asserts the importance of cross program collaboration between prevention and care programs for people with HIV/AIDS, as well as program integration with mental health, viral hepatitis, STD, substance abuse and other multiple occurring issues. The program effectiveness priority also emphasizes NASTAD's role in assisting states with implementing a reauthorized Ryan White CARE Act as well as promoting peer-based technical assistance in key program areas.

Objectives

- Build evaluation capacity for state programs that reflects accountability
- Position state public health to effectively address racial and ethnic disparities
- Position state public health to effectively address the needs of MSM and substance users
- Strengthen cross-program collaboration and integration activities (including mental health, STDs, substance abuse and other multiple occurring issues)
- Strengthen state-based program capabilities in key program areas

- Assist state HIV/AIDS programs implementing the reauthorized CARE Act
- Enhance/promote peer-based technical assistance in key program areas

Accountability

NASTAD Executive Director and senior NASTAD staff, in conjunction with the Executive Committee and other appropriate committees and work groups

Strategic Priority:

Enhance Member Leadership and Effectiveness

Rationale

As a membership organization, NASTAD's strength lies with its members. State and territorial health department HIV/AIDS and viral hepatitis prevention and care program leaders are public health professionals, administrators, fiscal agents, and visible leaders in policy arenas. They must have strong public health program skills and knowledge, and are accountable to several different stakeholders. In addition, AIDS directors who understand the historical context of public health's response in communities of color are better equipped to address the HIV/AIDS and viral hepatitis epidemics in these communities, and cultural competence is an important skill for directors and senior program managers. Furthermore, building leaders of color in health department HIV/AIDS and viral hepatitis programs is critically important. At the same time, turnover of AIDS directors and senior program managers significantly affects programs.

Given these set of circumstances, this priority recognizes the need for strong leadership within state health department HIV/AIDS and viral hepatitis programs that meets the current challenges of the epidemic. Maintaining and further developing the leadership skills of AIDS directors and senior program staff is critically important. This priority also recognizes that AIDS directors place a premium on peer-based networking and sharing, a cornerstone of NASTAD's domestic and global technical assistance (TA). Strong AIDS director policy and advocacy skills and collaborative activities with community alliances are also critical and should be enhanced.

Objectives

- Offer member services programs that develop leadership skills and expertise
- Build and ensure cultural competency related to race/ethnicity, MSM communities and substance users
- Maximize domestic and global peer-based TA to yield bi-directional benefit
- Increase leadership opportunities for minority health department staff
- Strengthen health department capacity in policy and advocacy activities
- Enhance health department collaborative activities with community alliances

Accountability

NASTAD Executive Director, Director of Service and Support, and other senior NASTAD staff, working in conjunction with the Membership Committee and other appropriate committees and work groups

Strategic Priority:

Strengthen NASTAD's Organizational Effectiveness

Rationale

NASTAD has made great strides in strengthening its organizational effectiveness. Sustaining and continuing that progress requires continued attention to this priority. In order to remain in the forefront in a time of increased "customer" expectations and fiscal pressure, NASTAD will focus on several factors that are key to its success. These include development of strong managers and supervisors who can lead a top-notch organization, continuous examination and enhancement of policies and procedures, and ensuring that NASTAD staff, including management, reflects the racial make-up of the epidemic. NASTAD will expand communication efforts within the organization and externally to build NASTAD brand recognition and reputation to facilitate support for NASTAD objectives. Attention will also be given to expanding the ability of the organization to solicit and receive grants, agreements, and contributions from a greater variety of sources.

Objectives

- Strengthen staff leadership, management and supervisor expertise
- Increase leadership opportunities for minority staff
- Enhance development capability & diversity funding, coordinated across programs
- Ensure management continuous quality improvement (CQI)
- Enhance communications, public relations, and marketing efforts

Accountability

NASTAD Operations Director with input and assistance from NASTAD Executive Director, other senior NASTAD staff, and Executive Committee as appropriate.

NASTAD Organizational Structure

NASTAD is headquartered in Washington, D.C., where a staff of between 25 and 30 implement NASTAD programs and promote policy and advocacy on behalf of its members. NASTAD's office is located at:

444 North Capitol Street, NW
Suite 339
Washington, D.C. 20001
Telephone: (202) 434-8090
Website: [.NASTAD.org](http://www.NASTAD.org)

This building also houses many offices for various states, as well as the National Governors Association.

Staff Directory

Information and links to NASTAD staff is accessible online at:

[://www.nastad.org/About/NASTADStaff.aspx](http://www.nastad.org/About/NASTADStaff.aspx).

If you are unsure to whom you should direct your inquiry, you may access the *Staff Organizational Chart & Directory* or the *Staff Directory By Topic Area* files by logging in to the website and navigating to the Member Services section of the website.

Contacting NASTAD

All NASTAD staff may be reached NASTAD's main telephone number: (202) 434-8090, or via the main NASTAD e-mail address: @NASTAD.org. All staff e-mail addresses are set up as: first +lastname@NASTAD.org.

NASTAD Programs

NASTAD's programs include HIV Prevention and Surveillance, Care and Treatment, Racial and Ethnic Health Disparities, Viral Hepatitis, Global, and Government Relations/Public Policy. Policy and program support for addressing racial and ethnic health disparities is an organizational strategic priority addressed across all of NASTAD's programs as well.

Care and Treatment Program

NASTAD's Care and Treatment Program provides programmatic and policy TA to state and territorial HIV/AIDS programs in a number of care and treatment-related areas, most specifically AIDS Drug Assistance Programs (ADAPs). NASTAD staff facilitates a listserv and peer-to-peer referrals, and encourage linkages among state and territorial AIDS programs. NASTAD also acts as the primary liaison and advocate for state AIDS programs with HRSA, the federal agency that is charged with oversight of Ryan White CARE Act programs.

Global Program

NASTAD's Global Program increases the capacity of resource-constrained countries to plan, implement, and manage HIV prevention and care activities as part of a unified U.S. government response to the HIV/AIDS pandemic. Relying on the extensive experience of NASTAD members in organizational assessment, training, policy and program development, prevention, care, integration of STD and HIV, community planning, voluntary counseling and testing, decentralization, scaling up, capacity-building, fiscal management, stigma/denial issues, and evaluation, NASTAD's Global Program responds to identified needs and priorities of country Ministries of Health, National AIDS Control Programs, and the CDC, through peer-based TA, delegation visits, and workshops/trainings.

Government Relations

To effectively translate state concerns regarding HIV care, treatment and prevention programs into sound federal policy, NASTAD's Government Relations Program applies a multi-layered strategy of communication with executive and legislative branches of the federal and state governments. NASTAD staff work directly with Members of Congress and their staff to develop legislative strategies pertaining to both annual appropriations and authorization legislation. NASTAD also plays a key role in shaping AIDS policy through work as a member of numerous coalitions.

Prevention and Surveillance

HIV Prevention and Surveillance focuses on TA and program development for effective HIV prevention and surveillance programs and planning. Through funding from the CDC, NASTAD staff work with state and local AIDS directors and health department staff to support peer-exchange and networking focused on building the capacity of health departments to plan and manage HIV/AIDS prevention programs. NASTAD also brokers agreements with CDC on issues related to health department implementation of HIV prevention cooperative agreements and works with other national organizations to foster collaboration and coordination at the local level.

Operations

NASTAD Operations staff keeps NASTAD running efficiently, managing finances, dues, meetings, member services, communications, office management, human resources, web-management, and reception duties.

Racial and Ethnic Health Disparities (REHD)

NASTAD has long supported state and local health departments' responses to the HIV/AIDS and viral hepatitis epidemics among racial and ethnic minority communities. NASTAD addresses REHD through a variety of program activities, targeted technical assistance, coalition work and policy and advocacy activities

aimed at increasing the synergy between public health, community stakeholders, and federal, state, and local governments. NASTAD recognizes that ongoing dialogue and programming to address the changing and complex demographics of the epidemic must also build upon opportunities for leadership while at the same time deconstructing social barriers that erode our best efforts to affect change.

Viral Hepatitis

The NASTAD Viral Hepatitis Program is focused on increasing the capacity of state and local HIV/AIDS and hepatitis health department programs to effectively integrate viral hepatitis prevention and care services into their existing programs to prevent viral hepatitis transmission and enhance services to populations at risk. The program is funded through a cooperative agreement with the CDC Division of Viral Hepatitis (DVH) and works closely with state and local health department adult viral hepatitis coordinators, who are responsible for managing the public health response to viral hepatitis at the state and local level. Program activities include supporting peer technical assistance on programmatic and policy issues; facilitating information exchange between health departments, federal agencies and other partners; and developing materials and other products to assist health departments in their efforts to integrate hepatitis prevention and care activities into existing programs.

NASTAD's Viral Hepatitis Public Policy Project, supported through grants from Roche Pharmaceuticals and Bayer Diagnostics, is also an important piece of NASTAD's Viral Hepatitis Program. The project is dedicated to increasing the visibility of viral hepatitis as a critical public health issue and to making adequate funding for viral hepatitis a national priority. Project activities include educating Members of Congress about viral hepatitis, supporting increased funding for viral hepatitis initiatives and working with the Administration and federal partners to provide leadership on viral hepatitis issues. NASTAD coordinates the Hepatitis C Appropriations Partnership (HCAP), which is a coalition of organizations dedicated to increasing funding for hepatitis C, and participates in the National Viral Hepatitis Roundtable.

NASTAD Publications

In addition to the monthly members-only electronic *NASTAD News*, NASTAD also produces a monthly electronic *HIV Prevention Bulletin* and supports several program focused listservs (e.g., ADAP and Title II). In addition, NASTAD issues numerous publications across all of its programs, often profiling innovative and cutting-edge efforts in state health departments.

Selected Recent NASTAD Publications

- Connecting the Dots Podcast: Black Gay Men #1 & #2 (February 2009)
- Issue Brief on Young Black and Latino Gay Men and Other Men Who Have Sex with Men (MSM) (February 2009)
- African American Researchers Directory (February 2009)
- ¡Adelante! Strengthening the Response to HIV/AIDS and Viral Hepatitis in Latino Communities (October 2008)
- MSM Issue Brief No. 3: Findings from Targeted Interviews on HIV Prevention Activities Directed Toward Black Men Who Have Sex With Men (MSM) (May 2008)
- National ADAP Monitoring Project Annual Report 2008 (April 2008)
- TA Report: Activities to Address HIV/AIDS In Native American Communities (March 2008)
- HIV Testing in Emergency Departments: A Primer Issues and Strategies for Health Departments (January 2008)
- Breaking Through the Silence: Key Issues and Recommendations to Address HIV/AIDS Among Asian Americans, Native Hawaiians, and Pacific Islanders in the United States (December 2007)
- A New Blueprint for the Future: Ending the Epidemic Through the Power of Prevention (November 2007)
- NASTAD Prevention Policy Agenda (November 2007)
- TA Report: Community Planning Approaches (November 2007)
- ADAP TA Report Nos. 1 - 4: Cost Containment Strategies for Eligibility Criteria, Formula Management, Managing Prescription Utilization, and Waiting List Management (Fall 2007)
- ADAP Glossary and ADAP Frequently Asked Questions (September 2007)
- Toolkit: Integrated, Collaborative or Merged Planning Processes (August 2007)
- Report on Findings from an Assessment of Health Department Efforts to Implement HIV Screening in Health Care Settings (June 2007)
- the Profile, Raising Your Voice: A Primer on Viral Hepatitis Policymaking and Programs at the Federal Level (May 2007)
- American Women and HIV/AIDS: Confronting the Crisis and Planning for Action – Regional Forum on African American Women Meeting Summary (April 2007)
- Why We Can't Wait: The Tipping Point for HIV/AIDS Among African Americans (April 2007)

Member Service and Support

NASTAD members receive many benefits, including regular policy updates and a monthly newsletter, the *NASTAD News*, written for and sent exclusively to NASTAD members and their key program staff.

Member Benefits

- Access to all NASTAD publications, including the *NASTAD News*, the *HIV Prevention Bulletin*, the *ADAP Monitoring Report*, the *ADAP Watch*, and several issue-specific reports, briefs and monographs. These publications provide concise and important information on federal programs, policy issues and proposed changes, and federal funding status reports to help inform programs at the state and local levels.
- Access to the *Members Only* section of the NASTAD website.
- An active voice on behalf of state and territorial HIV/AIDS and viral hepatitis programs with the legislative and executive branches of the federal government, with state and local executive branch agencies and organizations, and with other national organizations and constituency groups. Membership brings you regular policy/legislative updates and information on federal policies and activities and translates into advocacy for state HIV/AIDS and viral hepatitis funding on Capitol Hill and with the executive branch.
- Access to expert NASTAD program staff in HIV prevention, care and treatment, surveillance, viral hepatitis, global HIV/AIDS and government relations.
- Opportunities to receive and provide mentoring and peer-based technical assistance (TA) on HIV/AIDS and viral hepatitis planning, programs and evaluation, as well as through NASTAD's global program. TA from NASTAD staff is also available.
- Access to negotiated supplemental rebates and discounts negotiated by the ADAP Crisis Task Force with pharmaceutical companies for ADAP medication purchases.
- Many opportunities to network and share expertise with colleagues through the NASTAD Annual Meeting, participation in work groups and committees, and through mentoring and peer technical assistance.
- Opportunities to participate in program-focused listservs and email networks (e.g., Part B, ADAP, viral hepatitis, prevention, low-impact/rural, etc.).
- Opportunities to advise NASTAD and share models for addressing the health department response to HIV/AIDS in communities of color.
- Opportunities to participate in national policy development through the NASTAD Executive Committee, work groups and advisory committees.
- Opportunities to represent NASTAD at national meetings and consultations.

- Opportunities to develop your staff's capacity through their participation in NASTAD work groups, committees and coalitions, as well as opportunities for them to provide peer-based technical assistance.

Website

NASTAD maintains members-only content on its website. A Member Service and Support page contains information for NASTAD members and their staff with a member id and password to learn more about NASTAD and access the *NASTAD News*, which is reserved exclusively for NASTAD members and their designated health department staff. Members can also request TA and apply to become a peer TA provider on this page.

Leadership Development

Leadership development is designed to meet the management needs of new AIDS directors and their program managers. New or recently appointed AIDS directors, minority program staff, and new lead program staff may participate in the program. The program is peer-based, utilizing the skills and expertise of existing AIDS directors to work with new AIDS directors. For more information, contact Lynne Greabell, Director of Service and Support, [@NASTAD.org](https://www.nastad.org).

Mentoring Opportunities

NASTAD facilitates customized, peer-based mentoring matches for new AIDS directors with an experienced AIDS director. Mentors provide support to new AIDS directors as they acclimate to their new positions, serve as a resource on program, policy, and management strategies, and help them learn about NASTAD membership.

NASTAD's Member Services staff works with the Membership Committee to match-up new members with their mentors. Match-ups are based on the stated preferences of members for support from a peer in a jurisdiction of similar size, region, HIV/AIDS burden, and other demographic characteristics.

Face-to-face mentoring support through visits by the mentor or new member to the other's jurisdiction may be possible. To request mentoring support, please e-mail Lynne Greabell, Director of Service and Support, [@NASTAD.org](https://www.nastad.org), or visit the Service and Support page on the NASTAD website.

Technical Assistance

NASTAD provides domestic and global technical assistance (TA) in the planning and delivery of effective HIV prevention and care programs, ADAPs, HIV surveillance and epidemiology, capacity building, HIV/AIDS program evaluation, viral hepatitis program development, and HIV, STD, viral hepatitis program integration.

TA is available to HIV/AIDS directors and their staff, as well as health department viral hepatitis staff. Global TA and twinning agreements are available to other countries and U.S. health departments through NASTAD's Global Program.

Although linked by shared goals and coordinated assessment and delivery mechanisms, NASTAD's and domestic TA operate somewhat differently.

NASTAD's TA is:

Peer-based: delivered by health department (public sector) staff with experience and expertise in specific aspects of HIV/AIDS and viral hepatitis programming.

Nationally and locally focused – can include national perspectives and policy analyses of issues, as well as locally-specific support and experience.

Customized – delivered based on the expressed need of those requesting it. The requesting jurisdiction has a strong role in determining the response they receive and do not have to fit their needs into a set schedule or training.

Comprehensive –peers consult with colleagues on a range of issues, including:

- care/treatment programs
- ADAPs
- prevention programs
- viral hepatitis program development
- communities of color issues
- HIV, STD, viral hepatitis service integration
- surveillance systems
- community planning
- program management
- program evaluation

Fully Supported- The requesting jurisdiction does not need to incur expenses related to the TA that NASTAD provides. NASTAD financially supports the participation of peers, staff, and/or consultants in the TA event.

For more information about NASTAD TA, contact NASTAD's TA program staff at (202) 434-8090, or visit the technical assistance page of NASTAD's website at: .NASTAD.org.

NASTAD Policymaking & Relationship with Federal Agencies

NASTAD established its *Principles and Guidelines for Public Policy Decision-making* (attached) in 1999 to clarify and articulate in writing NASTAD's process for making decisions and setting NASTAD policy. NASTAD strives to make decisions by consensus, using voting when necessary.

NASTAD issues position statements, but also sets policy through formal, written letters and communications to federal agencies that interact/fund our programs, and to legislators on Capitol Hill and the Administration. A chronological file of NASTAD's positions and formal communications is forthcoming and will be available on the members-only section of our website.

NASTAD regularly interacts with several federal agencies, the Administration and Capitol Hill. To provide a basic overview of legislative and regulatory processes that impact HIV/AIDS funding and program decisions at the federal level, NASTAD issued its primer, *Changing Times, Continuing Needs: An Overview of HIV/AIDS Policymaking and Programs at the Federal Level*.

Principles and Guidelines for NASTAD Public Policy Decision Making

1. The Executive Committee is the governing body of the National Alliance of State and Territorial AIDS Directors and is authorized to make policy decisions on behalf of the Alliance. Other NASTAD work groups and committees are advisory to the Executive Committee.
2. The goal is to reach all decisions by consensus within the NASTAD Executive Committee.
3. Consensus is defined as reaching general agreement, i.e., when all members of a group are willing to accept a decision. This process is based on ensuring that all members feel their point of view has been heard.*
4. Key questions in relation to ensuring consensus has been reached:
 - Does everyone accept this decision?
 - Is there any opposition to this decision?
 - Can everyone support the decision?*
5. Each individual member will have the opportunity to advance the interests of his/her jurisdiction in the deliberative phase of the decision making process.
6. Careful attention should be given to ensuring complete fact-gathering and analysis during the deliberative phase of decision making.

7. It is acknowledged that each NASTAD member has a right to take a position within or on behalf of his/her own jurisdiction that may differ from the national position taken by NASTAD.
8. The Executive Committee may make a decision that it is necessary to shift from a consensus building process to a voting process. In considering such a shift, the Executive Committee will weigh the potential impact of a prolonged discussion attempting to reach consensus, which could result in the development of minority positions and factions. The option of deferring or tabling a decision and the option not to take a position should be considered by the Executive Committee.
9. When the Executive Committee determines that a NASTAD position on an issue is needed and it is clear that consensus cannot be reached, which would be evident in applying the key questions noted in #4 above, a vote will be taken and a two-thirds vote will be required for approval. A quorum must be present in order for a vote to be taken by the Executive Committee.
10. Under certain circumstances, the Executive Committee may decide to include a "minority" position when consensus is not reached and the issue is of particular importance to a number of members. The Executive Committee will weigh requests from jurisdictions wishing to have a minority opinion expressed as part of a NASTAD position and will determine on a case-by-case basis whether to approve such requests.
11. The Executive Committee will decide which issues require participation by the full NASTAD membership in making a final decision. The method by which the full membership will be consulted will be decided by the Executive Committee on a case-by-case basis depending on the circumstances.
 - Factors to be considered will include the importance of the issue in terms of the impact on each jurisdiction, and the urgency associated with formalizing a NASTAD position on the issue.
 - It may be desirable to get the sense of the full membership through a survey process or as a discussion agenda item at the NASTAD annual meeting, if the timeframe allows.
 - A survey of the membership could assess how important it is for a decision to be made at all or whether the membership would accept tabling or deferring a decision.
 - The Executive Committee may decide that it is necessary to solicit a vote of the membership by mail or at an annual meeting. This process will include conveying complete information on all points considered by the Executive Committee in the deliberative process to ensure the membership has the benefit of this information when asked to vote on an issue. A two-thirds vote will be required for approval.

Adopted October 1999

*Reference: "Problem Solving Process User's Manual," New York State Governor's Office of Employee Relations



BYLAWS

ARTICLE I - NAME

The name of this organization shall be the National Alliance of State and Territorial AIDS Directors, Inc.

ARTICLE II - PURPOSE

The purpose of this organization shall be to:

- A. Provide a forum for technical assistance and dissemination of information about effective prevention and continuum of care programs among members of the Alliance;
- B. Assist members of the Alliance in the local and national implementation of the core public health functions of assessment, assurance and policy development related to HIV programs;
- C. Develop and implement funded programs that impact the national and global landscape of HIV; and
- D. Network or affiliate with appropriate organizations working towards comparable goals.

ARTICLE III - MEMBERSHIP

- A. Active membership shall be limited to the one person who is designated by the government of the following areas as the person who is actively engaged in directing the AIDS prevention and continuum of care program effort for that government: states; territories; trust; and Washington, D.C. In the event that AIDS prevention and continuum of care are managed by two individuals from an eligible governmental jurisdiction, either individual may represent the jurisdiction in Alliance business. However, each government represented shall be entitled to only one vote in official decisions or business of the organization. Only one jurisdictional member may serve on the Executive Committee or hold an elected office of the Alliance; and
- B. Any member or officer may be suspended or terminated after a hearing or an opportunity to be heard by a simple majority of the Executive Committee (9) for any act considered by the Executive Committee to be injurious or prejudicial to the interests of the Alliance. Indebtedness to the Alliance may also be grounds for suspension or termination. No accused or accusing member shall be entitled to vote on the question of suspension or expulsion.

ARTICLE IV - EXECUTIVE COMMITTEE

The governing body of the Alliance shall be known as the Executive Committee. The Executive Committee shall:

- A. Have authority to act for and in the name of the Alliance on matters requiring action and shall report such actions to members of the Alliance as soon as possible;
- B. Propose amendments to the by-laws for approval by the members of the Alliance and shall enforce the by-laws that are in effect;
- C. Assure that all monies of the Alliance are used solely for furthering the mission of the Alliance;
- D. Keep written records of all Executive Committee proceedings and provide a summary report to the members of the Alliance within 30 days of each Executive Committee meeting;
- E. Decide all questions before the Executive Committee by majority vote with the Chair having the deciding vote in the event of a tie;
- F. Permit any findings or actions of the Executive Committee to be subject to reconsideration, by the Alliance membership on a motion, in writing, by an active member, at the next Executive Committee meeting; or as indicated by the active member at the next annual meeting;
- G. Be composed of the four (4) elected officers and fifteen (15) members-at-large. The combined membership of the Executive Committee should reflect sensitivity to geographic balance and disease prevalence. The immediate Past-Chair and the Executive Director of the Alliance are ex-officio members of the executive committee.
- H. The outgoing NASTAD Chair will automatically be appointed to a one-year seat on the Executive Committee, to serve in an *ex officio* capacity for the purpose of continuity and communication, unless the outgoing chair is elected to a regular seat on the Executive Committee; and
- I. Have the authority to establish contracts and to set the salary of, employ or terminate an Executive Director of the Alliance.

ARTICLE V - OFFICERS AND ELECTIONS

The officers of the Alliance shall be the Chair, the Vice-Chair, the Chair-Elect, the Secretary-Treasurer, and the Alliance Executive Director as a non-voting member. The Vice-Chair, the Chair-Elect, and the Secretary-Treasurer shall be elected for a one-year term by a majority vote of the membership at each annual meeting. These officers shall serve in their elected position from the close of the annual meeting until the close of the next annual meeting. The Chair-Elect shall serve as the Chair in the following year.

In the case of a vacancy in the office of the Chair, the Vice-Chair shall serve as the Chair. In the event of a vacancy in the Vice-Chair or Secretary-Treasurer, the elected members of the Executive Committee shall elect a successor Vice-Chair or Secretary-Treasurer from among themselves to serve the remainder of the term. An Executive Committee member elected to succeed to a vacant Vice-Chair or Secretary-Treasurer position retains their non-officer Executive Committee appointment for the full balance of their current term.

In the event of a vacancy in the office of Chair-Elect, a new Chair-Elect will be elected by the membership. The Membership Committee will present a list of candidates to the membership for this position and voting will be by secret ballot. The membership will elect a new Chair-Elect by emailing or faxing their choice to a designated NASTAD staff member. The staff member will collect and tabulate the votes and report the results back to the membership committee. The membership committee will establish a deadline for receipt of the votes. If an Executive Committee member is elected to succeed to a vacant Chair-Elect position they will not retain their non-officer Executive Committee appointment. The new Chair-Elect shall serve in this elected position until the close of the next annual meeting and shall serve as the Chair in the following year.

Election of officers and Executive Committee members shall be by secret ballot of members present at the annual meeting provided there is a quorum. Members who do not attend the annual meeting may vote by absentee ballot to be distributed 21 days prior to the meeting and cast at the annual meeting. Starting with the Chair-Elect, a secret ballot shall be held for each office requiring election. The membership committee shall prepare a slate of officers and executive committee members to serve specific periods of time. The nominations are to be presented to the members of the Alliance 21 days prior to the annual meeting. Additional names may be added prior to the ballot by nominations from the floor. A majority vote of those voting shall be required to elect officers. If more than two persons are on the ballot for any given office and none has received the majority of the votes cast, the person receiving the least number of votes on the first and each consecutive ballot shall be deleted from succeeding ballots. Members of the Executive Committee shall be elected by a single ballot and according to those receiving the most votes, i.e., if more persons are on the ballot than which positions exist, the person(s) receiving the least votes is not elected.

An office of the Alliance shall be considered vacant when the officer in question is taken by death, resigns, or becomes ineligible to continue as an active member of the Alliance.

NASTAD Member Handbook

At each annual meeting, five Executive Committee members shall be elected to serve three-year terms, replacing those members whose terms have expired, or serve specific periods of time replacing those members who have vacated their seat before their term expired. Those members will sit on the executive committee for the period of time remaining on those terms.

In the event of a vacancy in the non-officer members of the Executive Committee, the membership committee submits a list of at least two candidates within 45 days of the announcement of the vacancy to the Executive Committee giving full consideration to maintaining the geographic, epidemiological and state composition of the Executive Committee. The Executive Committee will approve the ballot and forward it to the membership for a final vote for a successor to complete the vacant position until the remainder of that seat's term.

ARTICLE VI - DUTIES OF THE OFFICERS

The duties of the officers shall be as follows:

- A. The Chair shall preside over the annual meeting of the Alliance and all meetings of the Executive Committee, and shall supervise the affairs of the Alliance. In the absence of the Chair, the presiding officer shall be determined by order of succession.
- B. The Vice-Chair shall serve as Chair in the case of a temporary absence of the Chair. In the case of a vacancy in the office of the Chair, the Vice-Chair shall serve as the Chair for the remainder of the term.
- C. The Chair-Elect shall serve as the NASTAD chair in the following year.
- D. The Secretary-Treasurer shall insure that all resolutions and proceedings of meetings are recorded and distributed to Alliance members within 30 days of any meeting. The Secretary-Treasurer shall insure that notices of all meetings are issued; shall insure that a record is appropriately kept of all monies payable to the Alliance; shall insure that a register is kept of all members of the Alliance; and shall insure performance of all duties pertaining to the office of Secretary-Treasurer. All monies payable by the Alliance shall be paid by checks signed by the Secretary-Treasurer, Executive Director, or duly appointed senior NASTAD staff.
- E. The responsibility for administration and management of Alliance operations shall be vested in a salaried staff head, employed by and directly responsible to the Executive Committee. He/she shall have the title of Executive Director. Subject to the budget approved by the Executive Committee, he/she shall employ and may terminate the employment of staff necessary to complete the work of the Alliance.

ARTICLE VII - COMMITTEES

- A. In addition to the Executive Committee, there shall be the following committees appointed by the Chair in consultation with the Executive Committee: a Membership Committee, a Finance Committee, and any special committees (e.g., federal agency interface, advocacy subcommittees or other committees), as may be authorized by the Executive Committee or as resolved by the membership of the Alliance.
- B. The respective chairs and members of the standing and special committees, other than the Executive Committee, shall be jointly appointed by the Chair and Vice-Chair of the Alliance unless otherwise ordered by the Executive Committee.
- D. All committee reports shall be provided in writing to the Secretary-Treasurer within 30 days following meetings.

ARTICLE VIII - MEETINGS

There shall be an annual meeting once each calendar year at a time and place determined by the Executive Committee. The Executive Committee shall convene, at the request of the Chair no less than (4) times annually. On petition of the majority of the membership, the Chair shall convene a special meeting of the Alliance membership.

ARTICLE IX - QUORUM

For annual meetings, a quorum shall consist of, at a minimum, a simple majority of the active membership of the Alliance. For Executive Committee meetings, a quorum shall consist of a simple majority of the elected members (8) and two officers. For both types of meetings, a quorum is required before voting occurs.

ARTICLE X - DUES

The annual dues for each active member of the Alliance shall be established by the Executive Committee by the first of the first month of each fiscal year and payable within 60 days of notice. The fiscal year will begin October 1 and end September 30 of the following year.

ARTICLE XI - AFFILIATION

The Alliance shall affiliate, based on a two-thirds vote of the active membership, with any organization having comparable goals to those of the Alliance.

ARTICLE XII - RULES OF ORDER

Should a procedural dispute arise, the rules of parliamentary procedure, according to the latest edition of Robert's Rules of Order, shall govern the Alliance meetings.

ARTICLE XIII - AMENDMENTS

The By-laws may be amended by a vote of two-thirds of the active members present and voting at any regular meeting of the full Alliance, provided that such amendments shall have been submitted to the Executive Committee and distributed to the full membership 30 days in advance of the annual meeting of the Alliance. Emergency revisions to the By-laws may be submitted to the Executive Committee and they may approve such revisions on an interim basis. In such cases, changes to the By-laws must be submitted to the active membership for permanent approval at the next annual meeting.

CERTIFICATION OF SECRETARY-TREASURER

I, the undersigned, do hereby certify that I am duly elected and acting Secretary-Treasurer of the National Alliance of State and Territorial AIDS Directors, and that the foregoing Bylaws comprising 6 pages, including this page, constitute the Bylaws of said alliance as duly adopted and amended at a meeting of the membership thereof duly held on the 2nd of May, 2007.

IN WITNESS WHEREOF, I have hereunto subscribed my name this 2nd day of May, 2007.



Patricia Young
Secretary-Treasurer

Top 10 Board Responsibilities (from BoardSource)

- Determine the organization's mission and purpose.
- Select the executive. Set clear objectives and expectations. Provide an adequate employment package.
- Clarify its own functions as distinct from the chief executive, including the executive's exclusive responsibility to select and supervise staff without board interference.
- Ensure effective organizational planning.
- Ensure adequate resources.
- Manage resources effectively.
- Determine and monitor the organization's programs and services.
- Enhance the organization's public image.
- Serve as a court of appeal.
- Assess its own performance.

Individual Board Member Responsibilities (from BoardSource)

- Know the mission, purposes, goals, policies, programs, strengths, needs.
- Serve in leadership positions with enthusiasm.
- Avoid prejudiced judgments from individuals and urge following policies and procedures.
- Follow trends in the organization's field of interest.
- Bring a sense of humor to the board.
- Serve on sub-committees and working groups and undertake special assignments when appropriate.
- Promote organization's policies, mission and goals nationally, regionally and internationally.
- Keep up-to-date on developments in the field.
- Respond to organizational requests for information or input in a timely manner.
- Suggest good nominees to the board.
- Prepare for and participate in all meetings.
- Ask timely and substantive questions.
- Maintain confidentiality of executive sessions and speak for the board or organization only when authorized to do so.
- Suggest agenda items.
- Read minutes and reports and provide timely and constructive comments, where required.
- Conduct efficient meetings with information sent in advance for participant review.

Board Responsibilities, from BoardSource (cont.)

Avoiding conflicts

- Serve the organization as a whole.
- Avoid even the appearance of a conflict of interest.
- Maintain independence and objectivity and bring fairness, ethics and personal integrity to decision making.
- Never accept (or offer) favors or gifts from (or to) anyone who does business with the organization.

Fiduciary responsibilities

- Exercise prudent oversight in the control and transfer of funds.
- Read and understand finance reports.

Fundraising

- Give an annual gift according to personal means.
- Assist the development committee and staff with your personal influence with others.

[.boardsource.org](http://boardsource.org)



NASTAD 2009 Work Groups, Committees and Other Communication Groups

NASTAD utilizes work groups, committees, networking groups and listservs to advance the priorities and objectives of the NASTAD strategic map and to conduct HIV/AIDS and viral hepatitis program activities. Following are descriptions of NASTAD's 2009 work groups, committees and other communication groups. Some work groups and committees are open to any state AIDS director or their designee. Membership on other committees is determined in other ways, as indicated. For most work groups and committees, the Chair also appoints an Executive Committee (EC) Liaison who is responsible for facilitating bi-directional communication between the work group/committee and the EC. NASTAD is in the process of evaluating the structure and effectiveness of most works groups and committees and as such, some changes may be made to these work groups and committees in 2009.

A roster of current work group and committee memberships is available on the "Members Only" section of NASTAD's website (if you do not know your login information, please follow the instructions that appear on the login page): [://www.nastad.org/MemberLogin.aspx](http://www.nastad.org/MemberLogin.aspx) (then view the roster in the "Hot off the Press" section).

WORK GROUPS AND COMMITTEES

Following is a list and description of current NASTAD work groups and committees:

ADAP Clinical Work Group

The ADAP Clinical Work Group (CWG) was established as part of NASTAD's ADAP technical assistance cooperative agreement with HRSA's HIV/AIDS Bureau. The CWG is comprised of medical directors, medical staff, and ADAP coordinators and is intended to offer sound clinical guidance to all ADAPs on changing clinical protocols, newly approved medications or laboratory tests, and formulary management. The membership is selected by both NASTAD and HAB staff and meets every other month by conference call. Recommendations from the CWG will be published via an ADAP Clinical Newsletter that will be available to all members.

Staff Lead: [Crutsinger-Perry](#)

EC Liaison: N/A

ADAP Crisis Task Force

The ADAP Crisis Task Force (ACTF) was established in 2003 to respond to the ADAP funding crisis. The ACTF's primary objective is to negotiate with pharmaceutical companies for supplemental cost savings for medications on all AIDS Drug Assistance Program (ADAP) formularies. Membership on the seven to ten member ACTF is by invitation only, based on a set of established criteria. ACTF members

serve for an unlimited term and new members are added as necessary - when vacancies occur that affect successful negotiations or when specific skills or experience are required by the task force.

Staff Lead: [Crutsinger-Perry](#)
Staff Consultant: Lanny Cross
EC Liaison: Jennifer Brown (UT)

African American Advisory Committee

The NASTAD African American Advisory Committee (AAAC) is comprised of African American AIDS directors and senior African American HIV program staff. Representatives from the six CDC directly-funded cities are also invited to participate on this committee. The committee advises NASTAD on addressing HIV/AIDS and viral hepatitis disparities among African American communities. The AAAC meets bi-monthly via conference call and periodically in person, depending on committee initiatives and available funding. Three subcommittees of the AAAC also meet bi-monthly via conference call.

In 2009, the committee will continue to focus on these priority populations: Black gay men/other men who have sex with men (MSM), African American women, and African American youth.

Staff Lead: [Batchelor](#)
EC Liaison: Sigga Jagne (KY)

Annual Meeting Planning Committee

This committee plans NASTAD's Annual Meeting program. The committee is reconstituted each year and consists of the NASTAD officers, members-at-large, and several NASTAD staff. The committee convenes monthly via conference call beginning in December/January each year and concludes with the Annual Meeting in late spring.

Staff Lead: [Greabell](#)
EC Liaison: Tom Liberti (FL), NASTAD Chair

Audit Committee

The NASTAD Secretary-Treasurer convenes an Audit Committee comprised of interested members to assist the EC in fulfilling its responsibility for oversight of the quality and integrity of the accounting, record keeping, reporting, and auditing practices of NASTAD. The committee communicates with the auditors independently of NASTAD staff to discuss the audit process, review the draft audit, and approve the final audit before forwarding to the EC for approval. In addition, the Audit Committee convenes as needed to approve the selection of an audit firm when a change in auditors is deemed appropriate. In 2009, this committee will review the results of NASTAD's FY2008 audit.

Staff Lead: [Blais](#)
EC Liaison: Veda Latin (OR), NASTAD Secretary-Treasurer

Care Advisory Committee

The Care Advisory Committee (CAC) provides input to NASTAD on issues and/or challenges facing Ryan White Part B Programs within states as well as helps to build stronger collaborations with HRSA's HIV/AIDS Bureau (HAB). The committee is comprised of AIDS directors and/or Part B administrators who meet via conference call on a quarterly basis. The committee will assist with convening national conference calls with HAB staff as needed and will provide input to NASTAD staff on various Ryan White and other HRSA/HAB issues.

Staff Lead: [Crutsinger-Perry](#)
EC Liaison: TBD

Finance Committee

The Finance Committee is established in NASTAD's bylaws to assist the Secretary-Treasurer in overseeing NASTAD's budget, funding streams, major expenses, banking and investments. The bylaws stipulate that this committee is appointed by the Chair, in consultation with the EC. The committee meets several times a year by conference call to review and recommend the annual budget to the EC for consideration, report on budget status, ensure dues are collected, approve major expenditures, and ensure sound banking practices. In 2009, this committee may also consider a variety of improvements to NASTAD's financial policies.

Staff Lead: [Blais](#)
EC Liaison: Veda Latin (OR), NASTAD Secretary-Treasurer

Global Program Advisory Committee

The Global Program Advisory Committee (GPAC) provides input into the activities of NASTAD's Global Program and guides its strategic growth. The GPAC meets monthly via conference call and once or twice a year in person, depending on committee initiatives, program needs and available funding. Membership on this committee is by appointment of the EC and includes NASTAD members and former members who are global program technical assistance providers as well as those who are not involved with the program.

In 2009, the GPAC will advise NASTAD on both programmatic and strategic areas. Programmatic areas include twinning, regional coordination and leadership development. Strategic areas include funding, growth, impact of the program and the support of field offices.

Staff Lead: [Velez May](#)
EC Liaison: Peter Carr (MN)

Latino Advisory Committee

The Latino Advisory Committee (LAC) advises NASTAD about issues health departments face in providing HIV prevention and care services to Latino communities. This committee helps NASTAD bridge programmatic concerns with the policy environment and provides guidance to NASTAD staff in creating products and activities in support of prevention and care for Latino communities. The

committee meets monthly via conference call and periodically in person, depending on priorities and available funding. The LAC is comprised of AIDS directors and senior health department staff from jurisdictions with large or emerging Latino populations (including the six directly-funded HIV prevention cities).

In 2009, the committee will advance priorities established in NASTAD's Call to Action, *Adelante: Strengthening the Response to HIV/AIDS and Viral Hepatitis in Latino Communities*.

Staff Lead: [Ruiz](#)

EC Liaison: Humberto Cruz (NY)

Membership Committee

The Membership Committee is a standing committee established in NASTAD's bylaws with responsibility for conducting the nominations and election of NASTAD's officers and EC, as well as soliciting resolutions for action by the membership and recommending changes to the bylaws as necessary. The Membership Committee advises NASTAD on member services and conducts new member welcome calls. Specific members of the committee are responsible for connecting the work of the committee with other work groups or committees on which they sit, as noted. The Membership Committee also advises NASTAD staff on leadership development activities. The Membership Committee generally meets monthly via conference call.

Staff Lead: [Greabell](#)

EC Liaison: Deb Szejda (MI)

Prevention Advisory Committee

The Prevention Advisory Committee (PAC) advises NASTAD on HIV prevention practice and policy and its impact on health departments. The PAC also provides input on specific NASTAD activities to ensure their relevance to health departments. CDC and other partners join specific PAC calls for the discussion of particular issues, as needed. Conference calls are held monthly. PAC membership is comprised of AIDS directors and prevention directors and is determined periodically by NASTAD staff in consultation with the EC Liaison.

In 2009, the topics likely to be considered include: rolling out the National Prevention Inventory Report; biomedical prevention interventions, including PrEP; monitoring HIV testing, including the 07-768 expanded testing initiative; partner services; and the development of the new health department program announcement and community planning guidance.

Staff Lead: [Cramer](#)

EC Liaison: Kevin Cranston (MA), NASTAD Vice Chair

Viral Hepatitis Work Group

The NASTAD Viral Hepatitis Work Group (VHWG) is comprised of state hepatitis program staff, AIDS directors and other health department program staff interested

in viral hepatitis issues. The work group provides a venue for health department staff to interact, exchange ideas and share information on viral hepatitis program and policy issues. The group often meets with CDC and other external partners to exchange information about issues impacting the development of viral hepatitis prevention and care programs. The work group meets monthly via conference call.

In 2009, there will be monthly pre-calls with health department staff to discuss advocacy and policy issues, as well as to strategize how to communicate and work more effectively with the CDC Division of Viral Hepatitis and other federal partners. Also in 2009, the New York State Department of Health will continue to partner with NASTAD to provide technical assistance to state hepatitis programs through the VHVG. Monthly calls will likely include: continued integration efforts, hepatitis surveillance, hepatitis care, HAV/HBV vaccination strategies, and working with people who inject drugs and substance use treatment facilities.

Staff Lead: [Taylor](#)

EC Liaison: Peter Whitarcar (HI)

Viral Hepatitis Advisory Committee

The Viral Hepatitis Advisory Committee (VHAC) provides input into the activities of the Viral Hepatitis Program, including the Viral Hepatitis Work Group (VHWG), guides the program's strategic growth and helps to build collaborations with CDC's Divisions of Viral Hepatitis and Immunization Services, HRSA and SAMHSA. The committee meets quarterly (or otherwise as needed), mainly via conference call.

Members include AIDS directors, Adult Viral Hepatitis Prevention Coordinators and Perinatal HBV Coordinators. Membership on this committee is determined by NASTAD staff in consultation with the EC Liaison.

Staff Lead: [Taylor](#)

EC Liaison: Peter Whitarcar (HI)

LISTSERVS AND OTHER COMMUNICATION GROUPS

Following is a list and description of each NASTAD listserv and other communication groups.

ADAP Listserv

The ADAP listserv is open to state health department staff working with the ADAP program. The listserv is intended to provide ADAP coordinators and staff the opportunity to ask questions of each other in a simple and immediate fashion and receive responses from a number of their peers. The listserv is a virtual peer technical assistance provider. For more information contact [Seegars](#).

Ryan White Part B Listserv

The Part B listserv is open to state health department staff responsible for the delivery of Ryan White services in the state. The listserv is intended to provide Part B staff and coordinators electronic access to their peers in other states in order to ask questions, discuss problems, and churn ideas. For more information contact [Seegars](#).

Prevention Networking Group and Listserv

The Prevention Networking Group (PNG) focuses on issues impacting the management of health department HIV prevention programs, including the programmatic and policy issues guiding health department activities. The PNG provides a forum for discussion of federal activities and emerging issues among health department colleagues, as well as for information exchange and consultation with CDC. The PNG is supported by a listserv and meets quarterly via conference call. In addition, NASTAD draws from the PNG for representation at CDC consultations and other national meetings, as well as for peer based technical assistance. To ensure complete information exchange, at least one person within each health department is designated to receive PNG notices, regardless of participation. The six cities directly funded by CDC are part of the PNG.

In 2009, the PNG will provide a forum for peer-based discussion and exchange on strategies for program collaboration and service integration; implementation of the revised partner services guidelines; capacity building and leadership development; the rollout of NASTAD's National Prevention Inventory; biomedical interventions including vaccines, microbicides, PrEP and PEP; as well as other topics identified by NASTAD and participants. For more information regarding the PNG listserv, contact [Shaull](#). Staff Lead: [Cramer](#)

Native American Networking Group

This group provides a networking opportunity among staff in health departments to support HIV/AIDS and viral hepatitis services for Native Americans. The group raises issues and shares strategies via conference call and email, and works with a group of Native American stakeholders periodically via conference call. Membership is open to any NASTAD member or their designee who wish to participate. The group generally meets quarterly via conference call. Staff Lead: [Greabell](#)

Viral Hepatitis Work Group Listserv

The Viral Hepatitis Work Group Listserv provides a forum for health department staff to discuss issues impacting viral hepatitis at the local, state and federal level. This listserv is open to health department staff involved in hepatitis related programming. For more information contact [Taylor](#).

Youth AIDS Resource Network Listserv

The Youth AIDS Resource Network provides state and local health departments, CBOs, and national organizations a forum for discussion and resource exchange about issues related to HIV/AIDS prevention programs and activities for youth. This listserv is open to relevant stakeholders interested in this topic. For more information contact [Jenkins](#).