



# Research & Evaluation Committee MEETING SUMMARY

Monday, June 21, 2021 from 10:09AM to 11:12 AM

Videoconference via Zoom: <a href="https://zoom.us/j/95271275360">https://zoom.us/j/95271275360</a>
Teleconference: (929) 205 6099 / Meeting ID: 952 7127 5360#

	PRESENT		EXCUSED		UNEXCUSED
1.	Summer Brown (Secretary)	1.	Ann Bagchi, Ph.D./DNP	1.	Natalie Muhammad
2.	Kasny Damas		(Chair)	2.	Travis Love
3.	Corey DeStefano (Vice-Chair)				
4.	Karen Ehiri (Non-Voting)				
5.	Debbie Mohammed				
6.	Warren Poole				
7.	Sharon Postel (Consultant Non-				
	Voting)				
8.	Providencia Rodriguez				

**Guests:** Bre Azanedo (CAPCO), Evelyn Jones, **PC Support Staff:** Tania Guaman and Vicky Saguay

#### 1. Welcome and Moment of Silence

Brown led the meeting on behalf of Dr. Bagchi who was excused from this meeting. Brown called this meeting to order at 10:09 AM. A moment of silence was observed for those living with, those affected by, and those who have passed from HIV/AIDS.

## 2. Roll Call

Support Staff conducted the roll call. Quorum was established during the meeting.

#### 3. Public Testimony

There was no public testimony at this meeting.

# 4. Review Action Steps

Action Steps	Responsible Party			
Post the final funding streams report on the NEMA website	Support Staff			
	and the second s			

The report was posted on the NEMA website at www.nemaplanningcouncil.org/community-reports.

# 5. Approval of the Meeting Summaries from May 17, 2021

The April 19th meeting summary was approved last month as amended.

The May 17<sup>th</sup> meeting summary was sent electronically in advance for review. Brown asked for a motion to approve the meeting summary as presented. Kasny motioned to approve. DeStefano seconded. Mohammed abstained. No oppositions.

#### 6. Updates from other Committees

- **COC** Support Staff provided the June 10<sup>th</sup> COC report. The following occurred at the meeting:
  - The committee will use and cite the latest clinical guidelines available for the review of service standards. The review of the Outpatient/Ambulatory Health Services Standard will be completed at the next meeting.
  - The committee approved new guidance for service limitations on service standards. A sentence will be added stating that the recipient's office will adjust limitations as needed and communicate those directly to the agency. This is the only change added to the newly approved Oral Health Service Standard.
  - The committee received a housing presentation with an overview of housing options (temporary, transitional, and permanent housing) as well as the various services outside of the Ryan White program that clients can qualify for. Information about how to become a housing ambassador was also provided.

The next COC meeting will be held on July 8, 2021 at 10AM via Zoom.

- **CPC** Support Staff provided the June 11<sup>th</sup> CPC report. The following occurred at the meeting:
  - A new member was voted on as an Essex County representative. There is one open seat for Union County representation.
  - The committee had a presentation on Ryan White Service Utilization and Spending Data.

    Early Intervention Services, Emergency Financial Assistance, Residential Substance Use and Transportation were underspent, and Food Bank/Home Delivered Meals was overspent. There is an increasing need for housing, emergency funds, oral health, and medical transportation.
  - The FY 2021 Funding Stream was reviewed, as well as the most current epidemiologic data.
  - The committee finalized the FY 2022 MAI priorities, which remained the same as FY 2021; and drafted the FY 2022 ranking and percentages for EMA-wide service categories. These will be finalized at the next meeting.

The next CPC meeting will be held on July 9, 2021 at 9:30AM via Zoom.

- CIA Guaman provided the May 26th CIA report.
  - There were 20 attendees from Essex County, 1 from Morris, 3 from Union, and 6 from unknown areas, for a total of 30 attendees.
  - The committee unanimously supported the Core Service Waiver and mentioned their priorities (housing, food, utilities, medical transportation, psychosocial, mental, and oral health services).
  - The committee completed an allocation and reallocation exercise and prioritized the 16 service categories. The top five were (1) Housing, (2) Food Bank/Home Delivered Meals, (3) Medical Case Management, (4) Emergency Financial Assistance, and (5) Medical Transportation.
  - For the next meeting, the committee requested a presentation on COVID-19 and how to prepare as things are reopening. Information about COVID-19 and COVID-19 vaccines will be given at the next CIA meeting. There will also be a Long-Term Survivor reflection.

The next CIA meeting will be held on June 23, 2021 at 5:00PM via Zoom.

#### 7. Old Business

# Review the interim needs assessment findings and recommendations

- Postel provided an overview of the Needs Assessment recommendations from the report that was previously shared. The following were highlighted:
  - The client level data found that telehealth services were equitably delivered by geography race, ethnicity, age, and gender. There was no bias on service delivery.
  - Those with temporary or unstable housing received less telehealth services.
  - Consumers liked telehealth because of convenience, the ability to stay home and not deal with COVID-19, transportation issues, office waiting room, etc. Some consumers felt that the quality of care was good. However, some consumers didn't like telehealth because of issues with the telehealth app used by their provider and because their providers were not on time for the calls.
  - The agency surveys shared some insights as follows: clients and agencies had trouble with technology but were able to overcome this issue. Telehealth usage is declining this year as some clients prefer in-person visits. Since telehealth was used by the Centers for Medicare and Medicaid Services (CMS) on an emergency basis, telehealth usage might decrease after it expires at the federal level. However, Ryan White-funded providers can continue to use telehealth services.

#### Recommendations:

- Additional training is needed to ensure that patients can use telehealth apps.
- Telehealth can be considered for clients who are virally suppressed or have a stable medical condition since the new standard for medical care only requires one in-person medical visit per year and the other visits can be done through telehealth with another viral load test during the year at least 90 days apart.
- Improve provider preparedness and timeliness. Explore provider best practices for telehealth efficiency and effectiveness.
- Telehealth can be used in case of inclement weather, and for clients with transportation and childcare issues.
- Incorporate telehealth evaluative measures into NEMA service standards once the Health Resources and Services Administration (HRSA) has issued guidance.
- Provide an EMA-wide and agency-specific CHAMP and CQM reports on health outcomes based on telehealth. This can be done routinely or on an ad-hoc basis in 2021.
- Perform more analysis on the effectiveness on non-medical telehealth services.
- Add a telehealth section in the FY2022 RFP to find out how agencies are planning to use telehealth services.
- The Research and Evaluation Committee (REC) will approve the Needs Assessment in July. The Planning Council will accept the report since there is no need for Planning Council approval.

### • Discuss updates of the Annual 2021 Epidemiologic Report

- The request for the FY 2020 Epidemiological Data was submitted on February 2021, but this data has not been released yet. Support Staff followed up on the request, but no information was received. Support Staff will follow up on the data request again.
- The Ending the HIV Epidemic (EHE) Request For Proposal (RFP) is closing today. They also used 2019 epidemiological data for their stat profile.

# Examine preliminary findings of the 2021 Full Assessment of the Administrative Mechanism Report

- Postel highlighted the following agency findings from this report
  - 35 agencies responded. The Ryan White Unit responded to questions about the RFP, contracting, and award letters.
  - One question was omitted from SurveyMonkey which asked: "How did your agency learn that the Ryan White Part A request for proposals was available?" This question was not on the spreadsheet that the consultant received.
  - Agencies thought the RFP described the application requirements eligibility, the purpose of objectives of Part A program, and criteria for reviewing proposals.
  - Agencies felt the technical assistance meeting was either excellent or good considering it was the first time having a virtual technical assistance session.
  - Up to two months were recommended as the time frame to prepare the proposals since agencies only had one month to prepare their proposals last year. This time frame can also account for the holidays during those months.
  - An agency wanted the RFP page limitation to be 125 pages since the Memorandum of Agreement document used for referrals is lengthy. Postel recommended to exclude those documents from the page limitation following the federal government guidance to exclude some external documents from the page limitation.
  - Agencies would like feedback on the reason for their selection or non-selection. An
    objective score sheet for agency feedback similar to what the Ryan What Office receives
    form the Federal Government can be used to provide feedback.
  - Most agencies received their letter of award by February 26<sup>th</sup> or March 1<sup>st</sup>.
  - One agency was concerned that CHAMP is not cloud-based. However, the cloud-based system is being developed right now and may be implemented by September or October. One agency mentioned that the information was redundant; the same information is entered in the EMR and CHAMP. However, the recipient included an auto-feed or data bridge option in the EHE funding for Essex County providers.
  - The referral system needs improvement to add the client start date to track six months annual recertification.
  - An agency had a concern about electronic signatures on purchase orders, since in-person signatures were required even during the pandemic.
  - The report showed that the recipient was able to allocate funds quickly and was responsive to needs. No deficiencies were found based on these findings.
- Comment after the report: A service delivery issue related to the Core Service Waiver was found. The final FY20 allocation expenditure was 75/25, instead of the 72/28 as stated in the Core Service Waiver. Agencies are not providing the support services at the level needed, which may have been related to COVID-19. This can be monitored moving forward to make sure support services are being spent as allocated.

## 8. New Business

There was no new business.

#### 9. Administrative Issues

No administrative Issues.

#### 10. Announcements

 The next CIA meeting will be held on June 23 from 5pm-7pm. The topic will be COVID-19 Safety Protocols with Debbie Mohammed. Attendees will participate in a raffle of two \$10 gift card and a \$25 stop and shop gift card.

# 11. Next Meeting

The next REC meeting will be held on Monday, July 19, 2021 at 10AM via Zoom.

# 12. Adjournment

Brown asked for a motion to adjourn the meeting. Poole motioned to adjourn. Rodriguez seconded. No abstentions or oppositions. The meeting was adjourned at 11:12 AM.