



Research & Evaluation Committee MEETING SUMMARY

Monday, September 20, 2021 from 10:00 AM to 11:27 AM Videoconference via Zoom: <u>https://zoom.us/j/95271275360</u> Teleconference: (929) 205 6099 / Meeting ID: 952 7127 5360#

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

Guests: Albert Eddyd **PC Support Staff:** Tania Guaman

1. Welcome and Moment of Silence

Dr. Bagchi called this meeting to order at 10:00AM. A moment of silence was observed for those who have passed on from HIV and COVID-19, as well as those living with both viruses.

2. Roll Call

Brown conducted the roll call and quorum was established.

Ehiri left her position with the Recipient's Office in September, therefore she was removed from the roster. Due to non-compliance with the committee's attendance policy, Natalie Muhammad was removed from the committee roster. She re-applied and is interested in becoming a member. **Motion**: Dr. Bagchi asked for a motion to add Muhammad back as a member of the Research and Evaluation Committee. DeStefano motioned to approve. Brown second. The vote passed unanimously.

The September 20 meeting agenda needed an amendment to include the review of the Integrated Health Plan section related to the REC.

Motion: Dr. Bagchi ask for a motion to approve this amendment for the September 20 meeting agenda. DeStefano motioned to approve. Brown seconded. The vote passed unanimously.

3. Public Testimony

There was no public testimony at this meeting.

4. Review Action Steps

	Action Steps	Responsible Party
1.		

There were no specific action steps from last meeting.

5. Approval of the Meeting Summaries from August 16, 2021

The July 19th meeting summary was approved last month as distributed.

The August 16th meeting summary was sent via email in advance for review. **Motion**: Dr. Bagchi asked for a motion to approve the meeting summary as distributed. DeStefano motioned to approve. Mohammed seconded. Brown abstained. The vote passed.

6. Updates from other Committees

- Continuum of Care (COC) Support Staff provided the COC report.
 - The last COC meeting was held on September 9. The following occurred at that meeting:
 - A presentation about best practices for creating safe spaces and providing care for LGBTQIA+ patients was provided by Dr. Michelle Dalla Piazza. Some of the key recommendations included asking open ended questions, starting at the front desk, and using audience-specific forms that gather details about the person's health and lived experience, and keeping an open mind and never making assumptions about gender preferences.
 - The non-medical case management and psychosocial service standards were reviewed and approved. Both revised versions were introduced to the Planning Council on September 15.
 - The COC committee will meet again on October 14 at 10am.
- Comprehensive Planning Committee (CPC) Support Staff provided the CPC report.
 - The CPC met on September 10; the following occurred at that meeting:
 - A new member joined the committee as a Union County Part A representative. There are no more seats open for part A providers at this time, but community members are welcome.
 - The 2022-2026 Integrated Health Plan Guidance was reviewed and a list of responsible parties for each required section was drafted. A discussion about these assignments was held at the Executive Committee on September 15.
 - The Planning Council membership nomination process was drafted for review by the Executive Committee, which will be brought up at the October Planning Council meeting.
 - The next CPC meeting will be held on October 14 and 9:30AM via zoom.
- **Community Involvement Activities Committee (CIA)** Support Staff provided the CIA report.
 - The CIA did not meet in August. The next meeting is scheduled for Wednesday, September 22 at 5PM via Zoom.

7. Old Business

• Discuss updates of the Annual 2021 Epidemiologic Report

Postel reported that the State 2020 epidemiologic data was received and highlighted the following:

The 2020 data shows a slight decline in the number of people living with HIV in the EMA compared to last year. Similarly, the State had a slight increase of less than 100 people living with HIV statewide. She suggests that this decline may reflect the lack of HIV testing

and new diagnoses during the COVID-19 pandemic. Additional epidemiologic data will be presented at the next REC meeting.

8. New Business

- Discuss topics for the Full 2022 Needs Assessment
 - The committee considered the following needs and issues for the research topic:
 - STI testing (e.g., gonorrhea and chlamydia) since this and other services were reduced during the pandemic.
 - o Assess plans for ongoing use of telehealth and its impact on access to care.
 - Mental health services and individual counseling, which may have been exacerbated with the pandemic; in particular the low lack of bilingual mental health (i.e. English as a Second Language [ESL] groups or limited English Proficiency groups); AND disparities that impact these populations.
 - o What services have been neglected during the COVID pandemic?
 - Are people living with HIV tested for STIs in accordance with recommendations on standards of care and/or evidence-based practices?
 - Medical screenings data:
 - gonorrhea not applicable 60%; negative 38%; positive 2%
 - chlamydia not applicable 60%; negative 39%; positive 2%;
 - syphilis not applicable 43%; negative 49%; positive 57%
 - CHAMP captures all data for clients who receive care from a medical provider. However, for someone who receives services only from a community-based provider and not medical care, their data does not get recorded.
 - Of the clients served by the Ryan White Part A program, 4300 had medical care; 2500 people had at least one result.
 - Committee members are asked to think about the topic suggested above or other issues that are pressing and should be addressed.
 - For this project, the tentative deadline to submit the scope of work to the Executive Committee for approval is December 2021.
- Review/ discuss the REC's accomplishments and progress on action items
 - The Unmet Need Framework presentation was on hold because HRSA's release of guidance was pending. This information is now available and was used for the preparation of the Ryan White Part A FY 2022 application. This presentation can be scheduled for October 2021.
 - The EIRC feedback on barriers/gaps to help identify potential topics for next year's needs assessment is postponed until January 2022, as reported by the Recipient.
 - Support Staff will consult with the Recipient on whether a Quality Improvement presentation can be scheduled for the REC October meeting.

- Review the 2022-2026 Integrated HIV Prevention and Care Plan Guidance, particularly Section III Contributing Data Sets and Assessments
 - The Support Team provided a high-level overview of the guidance for the development of the 2022-2026 Integrated Plan, as well as the specific guidance relevant to the Section assigned for the REC. Support Staff will send these documents to the committee via email.
 - The committee asked to review the feedback provided by the Community Involvement Activities Committee (CIA). There were questions about the feedback from the meeting, particularly regarding the 30-day wait period for ADDP application approvals.

The Support Team will send the full document via email. However, this issue was raised during a CQM meeting, and the State reported that wait times for application approvals only take up to three days. There are also Rapid Start services, pharmaceutical programs, etc. There is a need to communicate this information better to the community.

- The issues with wait time for medications are not just for newly diagnosed, this was also a
 problem for renewals. The Telehealth needs assessment showed no disparities in access to
 care. In addition, the Essex County EHE grant focuses on black and brown communities to
 improve their health outcomes.
- The REC will need to review the various documents before prioritizing a topic for the 2022 Needs Assessment. The work of the Needs Assessment and the Integrated Health Plan should be aligned to ease the workload.
- The report will need at least three months for approvals; therefore, the actual work should be getting done in the first five months of 2022.
- Dr. Bagchi requested a meeting with Joann and Dr. Johnson to discuss the budget needs for the work that needs to be completed. The work required for the Integrated Plan goes beyond what typically goes into even a full needs assessment. The bid for the Needs Assessment should consider the work for the Integrated Plan too.
- UWGUC has funds to begin the work of the 2022 Needs Assessment. There is no funding available for the Integrated Plan as HRSA guidance was only released in June 2021.
- The Support Team will send the following documents via email:
 - Summary of key considerations for the PSRA,
 - 2022-2026 HIV Prevention and Care Integrated Health Plan Guidance,
 - high-level overview of the guidance presented by the Support Team, and
 - notes from the July 2021 CIA meeting.

9. Administrative Issues

- Support Staff asked to discuss the request for bids for the 2022 needs assessment. Dr. Bagchi recommended that it's best to wait until further discussions about this work are held with Dr. Johnson and Joann within this week.
- Support Staff continuously monitors information related to the Integrated Plan. Resources that have been released can be found on the NEMA PC website for consideration. https://www.nemaplanningcouncil.org/community-reports/integrated-hiv-prevention-and-care-plan

10. Announcements

 The Community Involvement Activities Committee (CIA) will meet on Wednesday, September 22 at 5PM via Zoom.

11. Next Meeting

The next REC meeting will be held on October 18, 2021, at 10AM via Zoom.

12. Adjournment

Dr. Bagchi asked for a motion to adjourn the meeting. Muhammad motioned to adjourn. Poole seconded. The vote passed unanimously. The meeting was adjourned at 11:27 AM.