

RESEARCH & EVALUATION COMMITTEE (REC)

MEETING MINUTES

TUESDAY – OCTOBER 16, 2018 – 3:00PM TO 5:00PM

DC HEALTH-HAHSTA - 899 N. CAPITOL ST., NE; 4TH FLOOR; WASHINGTON, DC 20002

ATTENDEES/ROLL CALL					
COMMISSIONERS	PRESENT	ABSENT	GUESTS	PRESENT	ABSENT
Wallace Corbett	Cc		John Brooks	X	
Traci Dean	X		Hellen Flores	X	
Doug Fogal		X			
DeMarc Hickson (Chair)	X				
David Hughes	cc				
Jenne Massie	Cc				
Dennis McBride	Cc				
Lenora McClain	X				
Betelhem Mekonnen	Cc				
Kaleef Morse	X				
Natella Rakhmanina		X			
Andrew Torre	X				
HAHSTA/ ADMINISTRATIVE AGENT STAFF	PRESENT	ABSENT	COMMISSION SUPPORT STAFF	PRESENT	ABSENT
Paola Chanes-Mora	X		Patrice Bailey	X	
Leah Varga	X		Lamont Clark		X
Lena Lago	X				

AGENDA	
Item	Discussion
Call to Order	Meeting called to order 3:15pm by DeMarc Hickson followed by a moment of silence. Attendees introduced themselves.
Review and Approval of the Agenda	Traci Dean motioned to approve the October 16, 2018 Research and Evaluation Committee (REC) Meeting Agenda. Lenora McClain seconded the motion. The motion was approved.
Review and Approval of the Minutes	Traci Dean motioned to approve the September 18, 2018 Research and Evaluation Committee (REC) Meeting Minutes. Lenora McClain seconded the motion. The motion was approved.
Molecular Surveillance Assessment Discussion	<p>Leah V. noted that there was a presentation given by HAHSTA staff around Molecular Surveillance. HAHSTA will be conducting a survey to collect data from people who have fallen out of care, and they have offered the Commission an opportunity to add up to three questions to their survey. She noted that she made some suggestions and posted them to Basecamp, but wanted the group to share their thoughts.</p> <p>Leah stated they are still working on the survey so a copy of it is not available, but will ask. DeMarc noted it would be helpful to get a copy of their draft when it becomes available. Traci suggested trying to find out if people even wanted to be in care or how engaged they wanted to be in care. David asked if a person is out of care, could they still get Ryan White Services? Lena stated that a person can probably still get a support service and while being out of care, but a person who is seeking a core service likely should be in care. Lenora noted that people may come to get service such as EFA because their priority may be to pay their bills, but that person may not be engaged in health care.</p> <p>Kaleef noted that HAHSTA is actively seeking feedback from the community to ensure that all of their considerations and concerns are known so that as they design the program they are addressing as many issues as possible. Leah suggested getting questions back as quickly as possible. DeMarc suggested getting these questions by October 19th and the group will vote on those questions by October 26th.</p>
DC Cohort Longitudinal HIV Study and Needs Assessment Discussion	<p>Leah V. stated that the committee needs to make some decisions on the type of data they would like to request from the DC Cohort. She noted that they have only clinical data (not self-report) and the committee can ask for the clinical data. They offered help to facilitate additional data collection with providers that are involved in the cohort and the committee will have access to their advisory board as well. They are willing to come speak to the committee.</p> <p>Lena suggested looking at prescription management (writing and filling of prescriptions) because she thinks it is a “black-hole” of information. She also suggested thinking about information for specific populations that may be able to be gleaned from the data. Traci suggested seeing if there is data on clients who may use multiple sites. Lena suggested looking at the demographics are</p>

	<p>of people who are not retained in care and are not virally suppressed. Leah suggested asking them to come or call in and to have questions ready in advance to ask them what data is actually available. Leah will reach out to them to see if they can come to the next meeting.</p>
<p>Review and Discussion of the Data Collection Tools for the Assessment of the Efficiency of the Administrative Mechanism for GY'28</p>	<p>DeMarc stated he started formatting the Recipient and the Administrative Agent surveys. He stopped on the Provider survey because the committee was okay with the formatting of the Newark NJ Provider survey, which will serve as the model for the DC Provider survey.</p> <p><i>NOTE: Actual Changes Are On The Survey Documents and Will Not Be Noted In These Minutes.</i></p> <p>DeMarc noted that in previous discussions there was some concern about making sure that Providers understood that their survey responses would be kept confidential. So there was discussion around adding verbiage to the document to make note of this. Kaleef stated that this should not really be a concern because the information is taken in aggregate and put into a report so there isn't a way that the Recipient or the Administrative Agents would know what an individual provider said. He suggested making sure that the surveys ask questions that pertinent to the Administrative process in order to help the system get better.</p> <p>DeMarc asked who should be the contact person if someone had questions. Kaleef said he can be that person. Kaleef also suggested that there should be a timeframe added. That time frame would start from the date the survey is sent out.</p> <p>Kaleef suggested making questions 29 and 30 into a standing Directive that would require the Recipient (and Administrative Agents) provide a directory of providers at the beginning of every grant year.</p> <p>DeMarc stated he would make the edits to the documents and make the similar changes on the Administrative Agent Survey. He would work with Lenora on the changes to the Provider survey.</p>
<p>ANNOUNCEMENTS/OTHER DISCUSSION</p>	
<p>DeMarc and Traci noted they will not be here on November 20th. The committee proposed to have the next meeting on November 13th.</p> <p>Kaleef reminded the committee that on Thursday there will be a presentation on Molecular HIV Surveillance.</p>	
<p>HANDOUTS</p>	

The Washington, D.C. Regional Planning Commission on Health and HIV (COHAH) will invigorate planning for HIV prevention and care programs that will demonstrate effectiveness, innovation, accountability, and responsiveness to our community.

MEETING ADJOURNED	5:20 PM
NEXT MEETING	November 13, 2018 @ 3:00pm DC Health-HAHSTA 899 N. Capitol St. NE; 4 th Floor Washington, DC 20002