



Meeting of the
NEEDS ASSESSMENT COMMITTEE
Carrie Davis and Daniel Castellanos, DrPH

November 10, 2016
LGBT Community Center
208 West 13th Street, Rm 101, New York, NY
9:30 am – 11:30 am

Members Present: Daniel Castellanos, DrPH (Co-Chair), Carrie Davis (Co-Chair), Randall Bruce (Consumer At Large), Nagla Bayoumi, Timothy Frasca, Jennifer Irwin, PhD, Frank Machlica, Glen Phillip, Marcy Thompson, Maiko Yomogida

Members Absent: Fay Barrett, Maria Caban, Ph.D., Pedro Carneiro, Jeanine Costley, Guillermo Garcia-Goldwyn, Graham Harriman, Sabina Hirshfield, PhD, Julie Lehane, Ph.D., Anne Lyster, Antonio Munoz, Mary Poupon, John Schoepp, Robert Steptoe (alt. for Rosemary Lopez),

NYC DOHMH Staff Present: Nasra Aidarus, Jose Colon-Berdecia, Jan Carl Park, Kate Penrose, Darryl Wong

Material Distributed:

- July 14, 2016 Meeting Minutes
- CHAIN October 2016 Monthly TRT Meeting Agenda
- CHAIN – Possible 2016 Report Topics
- NYCDOHMH and CHAIN data for Needs Assessment Committee Plan, 5/15

Welcome/Introductions/Moment of Silence/Review of the Meeting Packet/Review of the Minutes:

Co-Chairs *Carrie Davis* and *Dr. Daniel Castellanos* opened the meeting, imploring members to keep focused on the Committee's charge, especially during this post-presidential election period and beyond. A moment of silence was observed in honor of those in our HIV Ryan White community, living and dead, whose efforts to build a comprehensive continuum of care must be preserved and further enhanced. After meeting attendees introduced themselves, the meeting packet was reviewed by *Darryl Wong* and the minutes from July 14, 2016 were accepted as presented.

DATA UPDATE

Dr. Castellanos re-introduced the document developed jointly nearly two years ago by the Committee and the NYCDOHMH (including CHAIN reports), which lists all reports produced to address treatment cascades, engagement in care, co-morbidities, social and economic vulnerabilities and health outcomes, service patterns and viral load, clinical outcomes and client and service patterns for the most impacted populations. *Tim Frasca* reminded the Committee that a commitment was made last year to summarize the above-referenced (9) issues into single page fact sheets for wider distribution and use by Planning Council members, including consumers.

Also referenced was the list of possible upcoming 2016 CHAIN report topics, which included a health-systems level analysis on the impact of Ryan White services. Having expressed interest in accessing data that addresses broad structural, social and economic factors that mediate or inhibit Part A service use and are linked to outcomes, a concept paper, using an ecologic analytical approach, could be developed in which CHAIN data could be merged with Ryan White Part A data to specifically link outcomes to service packages/clusters of services received by individual CHAIN participants.

Jennifer Irwin inquired about re-populating the committee with new members and asked if activities have been identified and prioritized following this past February's NA community briefing on HIV/Hep C Co-infections, economic vulnerability and housing insecurity. *Jan Park* provided a brief summary on the current status of these initiatives and noted that an Integration of Care meeting is being scheduled to provide updates on the status of the Grantee's Hep C activities. *Kate Penrose* also noted that the NYDOHMH will host an HCV/HIV Community Forum on 11/17, at which time the Grantee's strategy in ramping up Hep C care coordination will be discussed.

2016-2017 STRATEGIC THINKING

Meeting participants were split into two groups to brainstorm and identify areas of focus for the current planning cycle, with a view towards the types of "products" the Committee wishes to produce.

The group was also reminded that one of the committee's longstanding charges is to engage in a review of the 2017-21 Joint Integrated Prevention & Care Plan produced by the NYSDOH and the NYCDOHMH, following the issuance of the Blueprint to End the Epidemic, for the purpose of identifying areas for further exploration as well as new unmet needs and gaps.

Group 1 Recommendations (not in order of priority)

- Community Briefing/Forums (Year 2) addressing:
 - Housing and employment
 - Education
 - Stigma and discrimination
 - Young MSM of Color
 - Transgender populations
- Produce a set of recommendations to be submitted to other committees by assessing and reviewing data from community forums and the integrated plan
- Assessing and following up on topics of interest to consumers , e.g.– how the service landscape is changing
- Engaging in a more formal review of the Integrated Prevention & Care Plan
- Creation of one page info-sheets, outlining not just epi/data but action steps

Group 2 Recommendations (not in order of priority)

- Review of 2016 Community Briefing Survey results
- Summary of 2016 Community Briefing recommendations, current status and implementation/next steps
- Review of CDC employment grant, HRSA/SPNS Hep C grant, review of Integrated Plan and implication on EMA's services, ETE funding streams
- Impact of HASA For All policy change on housing needs & availability
- Impact of loss of HOPWA funding
- Rethinking/re-visioning of NYCDOHMH Sexually Transmitted Infections (STI clinics)
- Discussion of NY HIV Planning Group (HPG) priorities and gaps
- Conduct briefings and data gathering earlier in cycle in order to allow for development of recommendations and next steps towards the end of the cycle.
- Re-examining particular populations at risk
- Impact of Presidential election, future of Medicare and Medicaid, plans going forward

In response to the above sets of recommendations, the following comments were made:

- Rather than focus on specific products/outcomes, Group 2 would rather look at briefings and resultant data to better identify needs that have either been addressed or will be addressed
- The Integration of Care Committee is planning an HCV/HIV Community Forum on 11/17 to discuss its HRSA Hep C grant and implementation plans
- The Co-Chairs of both IOC and NA need to meet before the “joint” meeting is scheduled to discuss goals, activities, etc.
- What will the process be to prioritize these recommendations?
- There have been a plethora of presentations and briefings and more is not necessary
- Not all committee members, especially those not PC members through their employment, have the time to review documents independently. Some members would benefit from condensed, summarized presentations at meetings.
- We must always remember that comments must be directed to the greater good of the committee and not to individuals.

ADJOURNMENT

There being no further business, the meeting was adjourned at 11:30AM.

Part II: Strategic Thinking: 2016/17 and beyond

- *What are some of the major priorities for the committee in the coming year?*
 - Migrant/immigrant health
 - Age - young/older /Co-morbid conditions
 - ⇒ Service implications
 - ⇒ Policy implications
 - Stigma & discrimination
 - ⇒ Service implications
 - ⇒ Prevention/treatment implications
 - Tobacco Use
 - Sensory & Physical Disabilities
 - Changes to service landscape
 - ⇒ Ending the Epidemic (ETE)
 - ⇒ HASA
 - ⇒ ACA
 - Increase Consumer engagement

- Investigate 340B pricing of medications
- *What are some concrete documents or projects that you would like the committee to address?*
 - Conduct Fall 2016 Committee Strategic Retreat
 - Develop new community briefing agenda
- *What changes would you like the committee to make in order to enhance its effectiveness?*
 - Update Needs Assessment reports
 - Follow-up on recommendations
 - Deeper dives into identified topical areas
 - When requesting data, be specific about what data we need in order to make decisions
 - Examine and re-evaluate prior Committee work (Data Sources activities)
 - Introduce and utilize NY Links dashboard to bring in Federal, State and local community partners
- *What strategies would you recommend to increase the participation of committee members?*
 - Expand committee outreach to younger individuals

Committee Evaluations

The committee evaluation for the 2016 cycle was distributed; members were asked to thoughtfully complete the evaluation and submit to Darryl Wong, NA committee staff liaison, as this will help inform the direction of the committee vis a vis structure, future activities, logistics and meeting management.

Public Comment:

Adjournment: There being no further business, the meeting was adjourned at 11:30AM.