



Meeting of the  
**NEEDS ASSESSMENT COMMITTEE**

H. Daniel Castellanos, Dr.PH & Carrie Davis, Co-Chairs

March 9, 2017, 9:30AM -11:30AM

LGBT Center, 208 W 13<sup>th</sup> St, Rm 301

**By Conference Call – 1-866-213-1863, Access Code 3587454#**

**Members Present:** H. Daniel Castellanos, DrPH (Co-Chair), Carrie Davis (Co-Chair), Fay Barrett, Mark Browne, Randall Bruce (Consumer At Large), Billy Fields, Timothy Frasca, Jennifer Irwin, David Martin, Jan Carl Park, Glen Phillip, John Schoepp, Marcy Thompson, Maiko Yomogida, Ph.D.

**Members Absent:** Angela Aidala, Ph. D., Pedro Carneiro, Jeanine Costley, Guillermo Garcia-Goldwyn, Ph.D., Sabina Hirshfield, Ph.D., Julie Lehane Ph.D., Rosemary Lopez, Frank Machlica, Mary Poupon

**NYC DOHMH/PHS Staff Present:** Nasra Aidarus, Amber Casey, Jose Colon-Berdecia, Laura Hernandez, Melanie Lawrence, Katherine Penrose, Christina Rodriguez-Hart, Darryl Wong, Nagla Bayoumi (PHS)

**Materials Distributed:**

- Meeting Agenda
- 2/9/17 Meeting Minutes
- NYC DOHMH Sources of Data on HIV+ Individuals in the NY EMA
- Community Briefing Packet
  - [Mayor's Consolidated Plan](#) (pp89-94, link ppNA52-55)
  - [HOPWA Performance Profile – Formula Grantee](#)
  - [HIV Care Continuum for Housing Program Clients and Persons Living with HIV Overall, New York City, 2013](#)
  - [2016-1 CHAIN Briefing](#)
  - [HIV Care Cascade in the New York City HOPWA Program](#)
  - [New York City MMP Fact Sheet](#)
  - [HIV/AIDS Among the Foreign-Born in New York City, 2015](#)
  - Article - [Amid de Blasio's Modest Goals on Homelessness, State Proposal Gains Support](#)
  - [The Ryan White HIV/AIDS Program: The Basics](#)
  - Invite to Webinar: [Improving Linkage and Retention to Care Among Unstably Housed and Homeless Individuals Living with HIV](#) (link to archived presentation on youtube)
- HIV Planning Council Retreat Notes

## **WELCOME/INTRODUCTIONS/MOMENT OF SILENCE/REVIEW OF THE MEETING PACKET/REVIEW OF THE MINUTES:**

Co-Chair *Carrie Davis* opened the meeting, followed by member introductions. *Mr. Wong* asked the three new staff, Laura Hernandez (HOPWA), Christina Rodriguez-Hart (Epi-Liaison) and Melanie Lawrence (Planning Council) to explain their roles. A moment of silence was then led by Darryl Wong, in honor of those who have struggled, those who continue to struggle and all who do this important work. The meeting packet was introduced by *Mr. Wong* and the minutes were accepted (at the end of the meeting).

## **2017 COMMUNITY BRIEFING SUB COMMITTEE UPDATE:**

To be held Tuesday, April 25<sup>th</sup> at the Newman Conference Center, Baruch College, 151 E. 25th St., Room H750 (between Lexington and 3rd Aves.) from 8:30am-1pm. During last conference call the format for the half day event was determined. Three panels:

Panel 1: Overview of Changes in the Housing Landscape in NYC for PLWHAs – HRA, HOPWA and RW

Panel 2: Unmet Needs and Gaps – Vulnerable Populations, Services/Service Models, Accessing and Maintaining Housing and the Intersectionality of Housing and other Service Needs

Panel 3: Forecasting & Trends: 2017-20 – Policy & Funding considerations, Call to Action Plan/Action Plan

Some presenters have been scheduled. Question of whether Angela Aidala should present. Focus is on special needs populations, including immigrants and housing for all. Lead time is necessary for any data requests. Goal is to refine issues to be addressed. Melanie Lawrence will host these calls as we move forward. *Mr. Parks* suggested we bring in community members to the call, such as VOCAL. Housing organizations to contact were put forward: Bailey House, Supportive Housing, Safe Space, Ali Forney Center, Sylvia's Place, Housing Works, Iris House.

Bringing people together will help raise up issues that we need to work on. *Mr. Parks* questioned how to sell the event. *Mr. Castellano* ran down the list of to-do's: Panels need to be better focused with developed questions for discussion. Data request must be developed. Logistics like flyer development and marketing. Point persons for those tasks should be identified. *Mr. Parks* and *Mr. Wong* agreed to do outreach. *Mr. Schoep* will help with logistics. The grantee will help with extra hands on the day of the event. *Mr. Castellano* will take the lead on developing the data request. *Ms. Burnett* will take the lead on developing questions. Calls were previously scheduled for every 2 weeks. *Mr. Wong* suggested an alternate calling schedule. Phone conference time agreed for following week, Tuesday March 14<sup>th</sup>. It is up to the committee to guide the briefing in a new direction from last year.

## **DIFFERENT DATA SOURCES (POWERPOINT):**

Tri County data was included in some parts of the presentation.

*Ms. Penrose* introduced the eshare, which goes back to 2012 and is the Part A reporting system. (Electronic System for HIV/AIDS Reporting and Evaluation). Providers enter data on the services people are provided; substance abuse; some housing data; incarceration and more. Can be linked to the surveillance registry. Columbia collects data for CHAIN study (Community Health Advisory Information Network) which involves a lot of coordination with Care and Treatment at DOHMH – a longitudinal look at PLWH. Sample size is smaller – allows us to look at change over time. Client reported health stats, behaviors, adherence patterns. Not RW specific. Includes NYC and Tri County. CHAIN data goes back to 1994 and can be accessed through data requests. Can also do analysis requests. Can look at how different factors, i.e. food insecurity, impact health.

Epi and Field Services program maintains the surveillance registry – most complete source of test data, i.e. CD4 counts, viral loads, resistance, etc. NYC specific. Work with NYS a few times a year to get aggregates.

Medical Monitoring Project (MMP) – new sample every year; cross sample. Now pooling surveillance based sample – so can now try find people who are not in care. Focuses on access, services used, co-morbidities, etc. Funded by CDC as a supplemental surveillance project. Funded under the ACA.

DOHMH data can be matched with other data, i.e. PCSI (Program Collaboration and Service Integration) project: matches across jurisdictions. Matching is energy intensive. Enrollments in HOPWA, self-reported housing indicators.

Medicaid Admin Data – run by the state. Can be queried, requires a lot of manipulation. Depends on provider entry, but because it is payment focused can be lacking.

*Ms. Penrose* included a cheat sheet on comparing data sources in packet.

Did an HCV analysis and found that people are doing pretty well with HIV care but not so well with HCV treatment.

*Ms. Levine* continued the presentation. Identifiers allow for data to be looked at over time. ESHARE is only data during enrollment – surveillance allows us to see the past and future. CHAIN helps create a more complex view of the care continuum. Care coordination (CCP) has had great outcomes – but overall, all patients have been looking better, with CCP or not. Data shows that CCP has biggest impact on people who were never suppressed in the year before enrollment as well as new diagnosis. People who were already doing well with viral suppression show no benefit from CCP enrollment. 86% of NYC RW clients are in Medicaid. Cannot look at Part A in a vacuum. The SALIENT data set has been key to these insights.

Trying to focus on drop off in viral suppression among RW. What makes a difference in viral suppression, in terms of services, combinations of services, etc. Getting access to SALIENT data has been a challenge.

Can now look at specific RW services per person through CHAIN: need for services, resources, income, education level, and mental health and substance abuse issues and see if the RW version of the service was/is more useful. Analysis was originally done 16 years ago.

## **EXTRAORDINARY TEAMS RETREAT REVIEW**

All committee members were surveyed on one of the committees that they belonged to prior to the retreat– results were discussed by *Mr. Parks*. He noted that in general all of the committees are working well – but could do better, which is why the Extraordinary Team group was brought in – especially with the potential for the funding landscape to be subject to large cuts. *Mr. Castellanos* pointed out how the NA Committee scored, and asked the committee to pay attention to where the group scores were low. *Mr. Castellanos* asked if we could dig into the results at a future meeting. *Ms. Barnett* suggested we look at the scores as a point to improve from. The committee informally agreed to discuss the findings at a future date. *Ms. Davis* noted that retreat attendance was not great overall, but *Mr. Wong* noted that the survey was done by members who had and had not attended the retreat with a completion rate of approximately 12/17 – on par with other committees).

*Mr. Park* read the comments from the survey. In terms of improvement, suggestions were:

- to better define the NA's purpose;
- to design that purpose around the strengths of the members;
- stimulate more contribution of ideas;
- establish goals and objectives; more time allotted to processing info/ideas;
- minimize tension and sensitivity;
- highlight work of other committees.

In terms of moving NA committee forward:

- define goals and purpose for each meeting;
- PC provide unified goals and tasks across all committees;
- allow for multiple leadership roles, i.e. create a community briefing coordinator.

*Mr. Castellano* summarized the comments into 3 areas and asked for comment. *Ms. Davis* noted the time and asked members if they felt like the comments were a good direction to start the conversation at the next meeting.

*Mr. Wong* reviewed some of the simple solutions:

- name tags
- always make conference calls an option for meetings

*Mr. Park* is hoping to bring the consulting group that conducted the retreat back next year. *Mr. Fields* noted that committee members never get to know each other, do not make social connections, and that there is a need to get to know each other and check in.

*Mr. Wong* recommended everyone read the book, Extraordinary Teams, available on amazon: [https://www.amazon.com/Extraordinary-Groups-Ordinary-Achieve-Amazing/dp/0470404817/ref=sr\\_1\\_1?s=books&ie=UTF8&qid=1491414663&sr=1-1&keywords=extraordinary+teams](https://www.amazon.com/Extraordinary-Groups-Ordinary-Achieve-Amazing/dp/0470404817/ref=sr_1_1?s=books&ie=UTF8&qid=1491414663&sr=1-1&keywords=extraordinary+teams)

*Ms. Davis* asked everyone to reflect on what has been discussed and come to the table ready to discuss how we can be better as a committee. *Mr. Bruce* suggested the committee look at what other committee's results were.

*Mr. Castellano* suggested we look at what it takes to be a caretaker of the group.

**PUBLIC COMMENT:** Reminder on the importance of stable housing to PLWH, not only for keeping people healthy with a low viral count, but to prevent spread. Necessary to talk about how funding cuts will impact housing organizations. We don't want the cuts in housing to take us back to a time when transmission rates were very high.

**ADJOURNMENT:**

There being no further business, the meeting was adjourned at approximately 11:00AM