



Meeting Minutes
Needs Assessment Committee

June 3, 2005
9:30 AM–11:30 PM
APICHA (150 Lafayette Street, 6th Floor)

Meeting Attendees: Eli Camhi LMSW (Co-Chair), Susan Abramowitz PhD (Co-Chair), Angela Aidala PhD, Alison Chi, Mary Ann Chiasson DrPH, Ruth Finkelstein ScD, Susan Forlenza MD MPH, Janet Goldberg, Myron Gold, JoAnn Hilger, Howard B. Marcus PhD, Gregg Weinberg, Mindy Nass, Rob Gass

Members Not Present: Ryan Chavez, Ken Butler, Christine Campbell, Joel Hernandez, Ann-Gel Palermo, Eric Altman, Julie Lehane, Melissa Shurkin

DOHMH/MHRA Staff: Grace Moon; Robert Shiau

I. Welcome/Introductions/Review of Minutes

Susan Abramowitz opened the meeting.

II. Data Issues

Client-Level Data Project – Allison Chi from DataLink gave an update on the project. As of June 3, 2005, 161 agencies submitted client-level data. Information collected through the project includes address, gender, ethnicity/race, income, living arrangements, HIV/AIDS status, source of medical insurance, primary risk factor for HIV infection, co-morbidity (e.g., substance abuse, mental health), and service utilization data. Allison offered to do a presentation on the data field to the Committee. Gregg Weinberg from MHRA explained that the project will provide information on *how many* number of individual clients receive *which* Title I services and *where*, allowing the Council to examine and analyze service utilization data. He also explained that while not all data will be historical, some data will be stored and tracked historically. Susan Abramowitz requested that MHRA and DataLink present on the CLD project to the Committee and asked the Committee to start developing a set of research questions the project can answer.

Myron Gold reported that people were upset about Data Day 2 because there was no presentation on consumer issues and priorities. He stated that he is concerned about the disconnect between PLWHAs' needs and what NYSDOH and NYCDOHMH say PLWHAs need which, in his opinion, is hurting PLWHAs.

JoAnn Hilger explained that through the Primary Care Status project, all Title I-funded programs will be required to collect and report on client access to and maintenance in HIV primary care. Indicators include name of clients' HIV primary care provider and date of most recent primary care visit, whether or not client receives ARV therapy and the date of most recent prescription fill, and date and results of most recent VL and CD4 tests. JoAnn Hilger clarified that all these data are self-report data. Rob Gass informed that AI will collect those data as part of the Title I Quality Management Program from a sampling of providers through chart review.

In response to Myron Gold's question about how the URS improve the quality of life for PLWHAs, members of the Committee stated that better data assists in better planning and better data will allow providers to build a streamlined and clear database system which will lead to less time on administrative work and allow more time to provide direct services. Eli Camhi stated that in addition to collecting data as part of external reporting requirements, agencies truly benefit when they use data as part of their internal quality improvement activities.

Mapping Project – Gregg Weinberg informed the Committee that he has data from Title I, Title II, and Title III, Prevention (CDC), SAMHSA and SPNS and Part F (dental program) and will start collecting Title IV data. He stated that the project will show where all Title I, II, and III funded services are and what type of services are provided. Eli Camhi suggested overlaying the community neighborhood data to merge the surveillance and demographics data with the Mapping Project.

Susan Abramowitz stated that there is not enough information on women and children. Although there is some information from CHAIN, she questioned whether currently existing data on women and children is adequate. Rob Gass stated that in recognition of the special needs of women and children, specific issues related to this group of population are being addressed by various groups, including NYSDOH – NYSDOH is in the process of completing treatment guidelines for women as well as pediatric treatment guidelines, and the management of HIV infected women.

Susan Abramowitz stated that the decision to conduct special studies should involve the NA Committee. (The two studies in discussion are a needs assessment of PLWHAs with physical disabilities and the effectiveness of CABs, both proposed by the PLWHA Advisory Group). JoAnn Hilger suggested that the process of developing special studies needs to be better clarified to ensure that the NA Committee is involved in developing and recommending special studies to the Council.

III. Needs Assessment Committee: Roles & Responsibilities

Susan Abramowitz started the discussion by stating that the Committee has focused on planning for Data Days while other planning activities were being completed by other committees without the input from the NA Committee. She mentioned the 2005 – 2008 Comprehensive Strategic Plan completed by the Integration of Care (IOC) Committee with the Access to Care (ATC) and the Maintenance in Care (MIC) committees as well as the Consumer Committee, the priority setting work currently being completed by the Priority Setting & Resource Allocation (PS&RA) Committee, and the Unit Cost study.

In response, Rob Shiau clarified that the Data Committee last year identified the unit cost study as a need which is why the study is being conducted. In addition, Grace Moon reminded the Committee that when Emily Gantz-McKay, HRSA TA consultant, came beginning of this year to clarify the roles and responsibilities of the newly structure committees, the responsibility of developing the strategic plan was designated to the Integration of Care Committee (IOC), which is why IOC spearheaded that work. In addition to working with IOC, the consultant, Matthew McClain and Associates, Inc. worked closely with researchers (CHAIN, AIDS Institute, NYCDOHMH Surveillance) who are members of the NA Committee to develop and fine-tune the goals, objectives and measures.

Angela Aidala suggested that those members who are on other committees report to the NA Committee on a regular basis.

The Committee had an extensive discussion about its role in the planning process and how to implement a better data-driven planning process. One of the suggestions to work more closely with PC and committee members included Council members who are not familiar with data and research be part of the NA Committee. Mary Ann Chiasson stated that the PC members whose responsibility is to set service priorities and allocate resources should attend Data Days.

Ruth Finkelstein suggested the following list of objectives the NA Committee could use to evaluate its work:

- To inform the Planning Council of data that is relevant to their strategic planning and resource allocation responsibility.
- To infuse the planning processes with interpretation of data.
- To identify a need for additional data in the EMA to inform the planning and resource allocation process.
- To interpret evidence from disparate source.

She suggested that the NA Committee generate a list of activities to fulfill those objectives and conduct an outcomes evaluation to see if the objectives were achieved. She hypothesized that the way the Committee has fulfilled its responsibilities has not worked and the Committee needs to review how to better operationalize its responsibilities.

IV. Plans for Next Year

The Committee decided to hold a meeting in July to develop a set of measurable objectives it can use to measure its progress in meeting them.

V. Announcements

No announcements were made.

The meeting was adjourned.