



Research & Evaluation Committee MEETING SUMMARY

Monday, October 21, 2024, from 10:00 AM to 11:05 AM

Videoconference via Zoom: https://us06web.zoom.us/j/89756434893
Teleconference: (929) 205 6099 / Meeting ID: 897 5643 4893

	PRESENT	EXCUSED
1.	Ann Bagchi, PhD/DNP (Chair)	
2.	Corey Destefano (Vice-Chair)	
3.	Kasny Damas (Secretary	
4.	Lynette Abduwaliyy	
5.	Sharon Postel (Non-Voting)	
6.	Natalie Muhammad	

Guests: Ashanti Simpson-Little, Ashley Bramble, Dr. Lynch

PC Support Staff: Roberto Benoit, Richell Garcia

1. Welcome and Moment of Silence

• Bagchi called this meeting to order at 10:02 AM. A moment of silence was observed for all those living with, those who have passed, and those affected by HIV/AIDS.

2. Roll Call

• Support Staff conducted roll call. Quorum was established.

3. Public Testimony

There were no public testimony

4. Approval of the Meeting Summaries from October 21th, 2024

The meeting summary was sent out electronically ahead of the meeting. Bagchi called for a motion to approve the meeting summary. Destefano made a motion to approve the meeting summary, and Muhammad seconded the motion. There were no objections and Dr. Bagchi abstained.

5. Standing Committee Updates

- Continuum of Care Committee (COC) Support Staff provided the report.
 - o The committee met on Thursday, October 10, 2024, at 10 AM via Zoom.

- The committee reviewed and updated the Health Insurance Premium & Cost Sharing for low income, Oral Health service standards and the Foodbank/ Home Delivered Meals service standards.
- The service standards were submitted to the PC for a 30-day review.
- The COC committee meet with the CIA members to receive feedback on the Home and Community Based Service Standard.
- o The COC next meeting will be held on Thursday November 14th, at 10:00 AM via zoom.

Comprehensive Planning Committee – Support Staff provided the update.

- o The committee met on Friday October 11th, 2024, at 10 AM via Zoom
- Continue in-depth review of progress and update of 2022-2026 Integrated HIV prevention and Care Plan
- o The next CPC meeting will be held on Friday November 8, 2024, at 9:30AM via Zoom.

• Consumer Involvement Activities Committee (CIA) – Support Staff provided the update.

- The committee met on Wednesday October 23 at 5:00 via Zoom
- Discussion on the Home and Community Based Health service standard for the aging population.
- Bramble presented the Cohort: Non VLS of Essex County
- The next CIA meeting is going to be held on November 20 at 5pm via zoom

Nominations committee (NC) – Support Staff provided the update.

- o The committee last met on Friday July 25th, 2024.
- The Nomination committee meeting is tabled until further notice.

6. Old Business

7. New Business

Review progress of 2022-2026 Integrated Plan

Postel presented the NEMA HIV prevention and Care Plan finding:

- There have been small changes between the bimonthly reporting periods.
- The number of RWHAP clients continues to increase in 2024 by 4.7% from 6413 to 6712 as 4/30/24. Mostly due to undocumented individuals.
- MSM accounts for 26% of RWHAP clients in the EMA
- Black/African America are nearly 2/3 of clients. 36% are men and 27% women.
- The youth 13-24 and 19-24 totals stayed the same
- The ages 25-34 increased slightly from 15.2% to 15.3%
- The Transgender and new to care increase slightly.
- Individuals with Medicaid decreased from 44.7% to 44%
- The uninsured individuals increased from 19.7% to 20.2%. The newly diagnosed individuals as
 of 4/30/24 were 238. Increase of 3.5 % from the previous year and increase of 27 % from the
 baseline.
- The main two pillars from the integrated plan are diagnosis and the second pillar is treatment in NEMA.
- The goal for linkage to care is 95% by 2026. The NEMA current percentages total decrease to 79.9%
- The goal for VLS is 95% by 2026. ³/₄ of RW individual are VLS for 2 years straight. all the counties decrease

Postel noticed a trend in the decline of the viral load suppression in subgroups. Bagchi suggested identifying specific individuals to find the reason for the declines

Update on the Quality Improvement Plan and benchmarks

Bramble presented an update on the Quality Improvement Plan for FY23 and the current information for FY24. Bramble informed the committee of the mission of the Ryan White program, services and infrastructure. Bramble informed the committee of the data:

- NEMA represents 35.6% of the states, 37,776 people with HIV. NEMA holds 13,443 people with HIV, 64% of NEMA resides at Essex County, which is 9119.
- Newark remains the epicenter of New Jersey's epidemic, so that is 14%, or 5290.
- Union County represents 21%, which is 3041, and our Tri-county, More Sussex and Warren altogether are 15%. Morris is at 867, Sussex holds 210 and Warren has 206.
- Part A and MAI programs had 6671 unduplicated clients, while the EE program had 1339 clients. The NEMA total population is 2.1 million residents.
- o NEMA is 25% of the state's population and 35% of the state's HIV epidemic.
- The ARV always exceeds the goals of 95%. The lowest percentage is the MCM care plan. The annual plan will include goals to improve MCM percentage goals.
- The viral load suppression currently is at 89.93% and the Newark EMA program is monitoring the results in the next Quality improvement projects.
 - Linkage to care was at 81.66 for cycle 93 ending 2/29/24 and decreased to 75% for cycle 96. The difference was - 6.66 percent
 - The MCM was 50.33 for cycle 93 and increased to 52.22 for cycle 96.
 - The DVLS2 percentage increased from 72.78 to 72.96. This is an improvement of 0.18 percent.
- O Bramble mentioned that clients that receive MCM care plan had an improvement of their viral load suppression. The total number of clients that received care plans were 1896 and clients that did not received a care plan were 2091. The clients that received care plans had viral load suppression of 94.1% and clients not receiving care plan had VLS of 89.8%.
- Bramble informed the committee of the MCM data findings:
 - The care plan were not submitted into CHAMPS. The matter can be a data entry issue.
 - The care plans updates were captured every 6 months and in other cases care plans were submitted every 3 months.
 - Bramble informed the committee that the verbiage of the Medical Case Manager was changed in the COC committee.
 - The cohort remained with 180 clients. The following are three barriers that the clients mentioned: forgetting their medication, applying for insurance, the outreach was limited. Update the brochure of the provider and their services were also mentioned by the clients. The pill box distribution is an initiative for the Cohort.
- HRSA site visit for Part A findings:
 - CQM plan will be revised to include goals and activities of the EHE and EIRCs committee.
 - Bimonthly /monthly meeting with Leaderships.

- Refocus on Performance Measures based on priority populations. The introduction of the Home and Community Based services and the youth populations.
- CQQII training and certifications.
- Increased gather more inclusion to strengthen and expand data and performance measures. created services are needed
- Bramble recommended that more representatives from the community should come to the QM meetings. Lynnette suggested creating focused groups to hear lived experience from the community.
- Bagchi recommends focusing quality improvement measures on the disparities.
- Bramble mentioned that HRSA recommended engaging youth living with Newark EMA.

Discuss topics for the 2025 Needs Assessment

- Bagchi mentioned that the FY25 needs assessment should focus on engaging the youth in the Newark EMA and the aging population. The committee members agreed on the youth and aging population for the FY25 Needs assessment topics.
- o The other topic can be related to succession planning.

8. Administrative Issues

There were no administrative issues.

9. Announcements

There were no announcements.

10. Next Meeting

• The next meeting will be held on November 18th, 2024, at 10:00 am via Zoom.

11. Adjournment

 Bagchi called for a motion to adjourn the meeting. Muhammad made the motion to adjourned and Destefano seconded. All were in favor, no abstentions, or objections. The meeting was successfully adjourned at 11:05 AM.