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CDC FGH JEMBI EPTS Weekly Status Meeting February 11, 2019

1 mensagem

Rein, Maria (CDC/DDPHSIS/CGH/DGHT) <zsa9@cdc.gov>

11 de fevereiro de 2019 às 21:27

Hello,

Attached are the notes from our meeting today. Thank you Zainabe for sending the first draft. Please let me know if you have any edits.

I have a few items to follow up on.

Look forward to FGH providing the IM ER4 SQL Script tomorrow.

Good night! Maria

CDC FGH JEMBI EPTS Weekly Status Meeting

Monday, February 11, 2019 3:39 PM

Meeting Subject: Weekly CDC FGH JEMBI EPTS Status Meeting - 2/11/2019

Meeting Date: 2/11/2019 3:30 PM

Location: CIBUM

Link to Outlook Item: click here

Invitation Message

Participants

🛂 Rein, Maria (CDC/DDPHSIS/CGH/DGHT) (Meeting Organizer)

Ntasis, Themos (CDC fgh.org.mz)

🔁 Campion, Alessandro (CDC gmail.com) (Accepted in Outlook)

🔁 Agnaldo Dinis Guambe, (CDC/DDPHSIS/CGH/DGHT) (Accepted in Outlook)

🔽 Zainabe Dada (Accepted in Outlook)

- Pinki Meggi (Accepted in Outlook)
 Antonio Vasco Sitoi
 Giles, Denise (CDC/DDPHSIS/CGH/DGHT)
 Raja, Madona (CDC/DDPHSIS/CGH/DGHT)
 Eurico José
 Fernanda Alvim
- **Notes**

EPTS February Release - Early Retention Indicators

🛂 jembifocalpoint@googlegroups.com

- ER IM2 is complete coding, testing is in progress
- CHASS/FHI provided feedback and said the numbers looked good
 - No other clinical partners have provided feedback , probably because the timeline to return results was short
- FGH and JEMBI are testing against de-identified databases, they received all databases except from ICAP but JEMBI is working with ICAP to obtain the database
- Code for IM ER4 was pending requirements clarification
 - o For IM ER4, the only change is that we start looking at 5 month previously, we look at 120 days, but we look back one more month as discussed with Stan
 - Requirements finalized today, significant delay
- FGH will submit IM ER4 SQL script to CDC to distribute to clinical partners, along with requirements document for review tomorrow
- FGH and JEMBI will test IM ER4 against de-identified databases
- TLD formulations should be reviewed by someone other than FGH developers, such as JEMBI BA staff.
 JEMBI will ask Dr. Helder to review
- The EPTS release containing the Early Retention Monitoring Report will be released late Thursday
- Need to discuss the name of the report as it is the same name Dr. Helder wants to use for similar indicators and it appears as if the requirements for the indicators might not align between PEPFAR and MOH
 - o CDC indicated it is for PEPFAR programs to work with Dr. Helder and Maria will follow up
 - MOH has defined 2 other indicators from the Intensive Monitoring Report in EPTS that was developed by UCSF they have modified and provided requirements for to FGH and JEMBI
 - JEMBI will provide the requirements document for PEPFAR review
 - % of newly enrolled in care on same day of HIV diagnosis

- % newly on ART with 3 drugs pick-ups in the first three months after ART initiation
- For March release
 - Remove the IM ER2 and IM ER4 from the UCSF Intensive Monitoring Report
 - o CDC to clarify with MOH to remove the indicator
 - Include TX PVLS on the report with the new changes (use FGH script) JEMBI to align with FGH script
 - Provide a script to CCS to correct data stored in the incorrect field (date of death being stored in ART Pick Up date)
 - Determine if any modifications needs to be made to TX CURR by reviewing output from partners and scheduling meetings
 - o CDC to follow up with PCO/M&E Team
 - Include TX TB and TB PREV, TX ML (if requirements can be defined for TX ML)
 - Include the FSR, laboratory order form for DISA linkage and for "routine/targeted"
 - NUIC need to obtain the format from UNICEF
 - Evaluate the ability to capture the SISMA (code is remaining as 8 digits) and IPSL code on EPTS so when partners report the IPSL and SISMA codes will be reported along with the report
 - Add the MOH monthly report

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