U.S. Department of Health and Human Services National Institutes of Health Office of AIDS Research

Office of AIDS Research Advisory Council 45th Meeting

July 18, 2017

WebEx and 5601 Fishers Lane, Suite 2F100 Rockville, Maryland

Draft Meeting Minutes

Council Members Present: Dr. Monica Gandhi (Chair), Dr. Elizabeth Church (Executive Secretary), Dr. Ralph J. DiClemente, Dr. Priscilla Hsue, Dr. Daniel R. Kuritzkes, Dr. Ronald T. Mitsuyasu, Dr. Lynne M. Mofenson, Dr. Scott D. Rhodes

Ad Hoc Members Present: Dr. Richard E. Chaisson, Dr. Elizabeth Connick, Ms. Dazon Dixon-Diallo, Dr. Maureen M. Goodenow (Director of the Office of AIDS Research), Dr. Alan E. Greenberg, Dr. Roy M. Gulick, Dr. Jennifer Kates, Dr. Michael M. Lederman, Dr. Nancy Raab-Traub, Dr. Steffanie A. Strathdee, Dr. Charles Wira

Ex Officio Members Present: Dr. Carl Dieffenbach, Dr. Jonathan Mermin

Invited Special Guests: Dr. Ingrid Bassett, Dr. Tricia H. Burdo, Dr. Kimberly K. Scarsi, Dr. Bruce R. Schackman

Council Members Absent: Mr. Moisés Agosto-Rosario, Dr. Justin C. McArthur

Welcome and Meeting Overview

Monica Gandhi, M.D., M.P.H., University of California, San Francisco

Dr. Monica Gandhi welcomed participants to the 45th meeting of the National Institutes of Health (NIH) Office of AIDS Research Advisory Council (OARAC). Meeting materials provided to Council members included the agenda, a conflict-of-interest form, and minutes of the 44th OARAC meeting on April 6, 2017. Members of the Council motioned and voted to accept the minutes from the 44th OARAC as written. Dr. Gandhi then briefed the Council on the agenda for the day, noting the inclusion of time in the agenda for public comments.

Report of the Office of AIDS Research (OAR) Director

Maureen M. Goodenow, Ph.D., OAR, NIH

Dr. Maureen Goodenow welcomed the members of the Council, representatives from the NIH and other government agencies, and guests from professional and lay organizations whose interests and activities align with the OAR. She particularly welcomed the new representative from the National Cancer Institute,

National Cancer Advisory Board, and invited special guests. Dr. Goodenow covered key appointments in the government relevant to the function of the OAR and gave an update on the OAR staff.

Dr. Goodenow then highlighted activities of the OAR. She thanked those who participated in the request for information (RFI) that was posted for the development of the FY2019 Trans-NIH Plan for HIV-Related Research. The data from the RFI are being analyzed and will be incorporated into the final plan.

Dr. Goodenow also reviewed that she received the Jonathan Lax Memorial Award - held each year in memory of leading AIDS activist Jonathan Lax - from the Wistar Institute and the Philadelphia FIGHT Community Health Centers. She was delighted to meet those working on behalf of the people living with HIV/AIDS in the Philadelphia community and deliver the Jonathan Lax lecture at this annual award ceremony.

Dr. Goodenow informed the Council the OAR plans to convene two specific task forces in the near future: 1) a cost sharing task force; and 2) an implementation science task force. She explained that the OARAC already has five long-standing working groups that develop and revise the Department of Health and Human Services guidelines for HIV treatment and prevention, as well as the prevention and treatment of HIV-related opportunistic infections, in children, adolescents and adults. These two new OAR task forces will not become working groups, but will be focused, nimble, and time- and task- limited. If OARAC members are interested in participating in one of these two groups, they should let Dr. Peter Kim know of their interest. Dr. Kim then presented information on the focus and purpose of the two task forces.

OAR Task Force on Cost Sharing

Peter Kim, M.D., OAR, NIH

Dr. Peter Kim, Deputy Director of the OAR, reminded the Council that since its inception, the OAR has aimed to allocate and manage funds designated for HIV/AIDS by the NIH in the most productive and efficient manner towards the highest priority research. Given the enormity of the HIV pandemic, the breadth of HIV research areas, and the evolution of scientific discovery in HIV/AIDS to date, the development of cost-sharing policies will now be critical to ensure that research of the highest merit and relevance to HIV/AIDS continues to be appropriately funded.

Dr. Kim highlighted that science conducted by the various NIH Institutes and relevant to the field of HIV is highly interconnected. Some high-priority research areas and highly meritorious research programs incorporate investigations with both HIV and non-HIV components. Given this, and the lack of a consistent trans-NIH policy for sharing costs, the OAR will form a task force to draft a cost sharing policy that addresses the intersection of HIV research with other relevant research across the NIH Institutes, Centers, and Offices (ICOs).

The OAR cost sharing task force will review the current practices and policies by which NIH-designated HIV/AIDS funds are allocated to projects and/or areas of science across the NIH ICOs. Then, the task force will develop and recommend to the OAR a high-level cohesive and consistent trans-NIH policy on cost sharing and an implementation strategy for the policy. The OAR will bring the recommendations from the task force to the NIH ICO Directors for input. Thereafter, the OAR will bring the recommendations to the OARAC for discussion and approval.

Dr. Kim covered the expected membership for the task force and the time line for deliverables. He asked Council members for feedback on the OAR cost sharing task force.

Discussion Highlights from the OAR Task Force on Cost Sharing

Dr. Gandhi asked if the task force will refer specifically to cost sharing across the NIH institutes or if cost sharing outside of the NIH will be considered. Dr. Kim confirmed that the OAR cost sharing task force will only consider cost sharing across NIH ICOs. He explained that, for any given scientific area or topic with relevance to the HIV/AIDS research agenda, the OAR task force would come to an agreement that a certain percentage of research will be funded with AIDS dollars, and a certain percentage with non-AIDS dollars from the ICOs.

Dr. Gandhi asked if the cost sharing task force will include volunteers from the OARAC. Dr. Kim replied that OARAC members are welcome to volunteer for this short-term task force. He reminded the Council that all members will have a chance to discuss and approve the final recommendation from the task force.

OAR Task Force on HIV Implementation and Behavioral and Social Science Research Including Research Across the Lifespan

Peter Kim, M.D., OAR, NIH

Dr. Kim assured the Council that the OAR takes the NIH mantra "to turn discovery into health" seriously. NIH-supported research continues to discover efficacious interventions for preventing and treating HIV, yet translating these advances into positive health outcomes requires implementation science.

Dr. Kim affirmed that the delineation of goals and populations for HIV prevention and treatment advances is critical when deciding how to allocate limited resources to improve the health of people living with HIV across the lifespan and ultimately end the epidemic. To ensure past and current investments are fully actualized into public health impact, the OAR needs to evaluate the current portfolio of implementation science funded by the NIH to identify gaps and opportunities, identify the most important populations to focus on for the greatest impact, apply the latest advances in behavioral and social science into implementation research methodology, and engage stakeholders and partners.

The OAR will establish an implementation science task force to address key questions and provide recommendations to the OAR. The implementation science task force will identify stakeholders and potential partners within the NIH and across US agencies and departments; develop a framework for partnership with these stakeholders to leverage resources to meet mutual goals; and define mechanisms to fund and implement high-priority HIV and HIV-related implementation research. The OAR implementation science task force will also identify the populations who have not yet benefitted maximally from recent advances in HIV prevention and treatment for further implementation research, and also help provide recommendations on how to impact implementation of key advances across the lifespan.

Dr. Kim covered the expected membership components and timeline of the implementation science task force. He pointed out that the cost sharing task force will be underway when the implementation science task force is initiated. The OAR will share task force recommendations with NIH Institute Directors prior to bringing them to the OARAC for discussion and approval.

Discussion Highlights from the OAR Task Force on HIV Implementation and Behavioral and Social Science Research Including Research Across the Lifespan

Dr. Alan Greenberg commented that he and others have recently proposed an inter-Center for AIDS Research (CFAR) working group on implementation science. The CFAR working group will likely have reasonable synergy with the proposed OAR implementation science task force. Dr. Kim thanked Dr.

Greenberg for his comment and agreed to discuss the synergies further with Dr. Greenberg or the most appropriate representative of the inter-CFAR working group on implementation science.

Dr. Stephanie Strathdee commented that the unit of analysis for these studies is not the individual, but the clinic, community, or city. The typical NIH funding mechanism does not include a budget large enough to support the size of such studies. Dr. Strathdee asked how the budget limitations will be addressed; and Dr. Strathdee and Dr. Ralph DiClemente both asked if cost sharing will be part of the strategy. Dr. Kim agreed and emphasized that partnerships are needed to help ensure the needed research happens within a framework that is affordable and that leverages resources from partners with mutual interests. Dr. Gandhi responded that the timelines Dr. Kim presented for the two task forces would (e.g. first cost sharing, then implementation science) work well to allow for communication between the two OAR task forces.

Dr. Charles Wira asked if basic research scientists will be included in the OAR task forces. Dr. Kim confirmed that most of the members of the OAR task forces will be research scientists, whether focused on clinical research, translational research or basic science. Dr. Strathdee asked if training will be discussed in the implementation science task force. Dr. Kim confirmed that training will be one topic of discussion.

Public Comments

Dr. Gandhi called for public comments; no comments were given.

Closing Comments

Maureen M. Goodenow, Ph.D., OAR, NIH

Dr. Goodenow reiterated the OAR's gratitude to the OARAC members and to the stakeholders in the HIV research community who participated in the meeting. She conveyed excitement for and appreciation of the dialogue between the OAR, the OARAC and active meeting participants.

Cost sharing and implementation science both require the development of transparent policies and practices to achieve the desired objectives. The OAR cost sharing task force will discuss and develop the first consistent Trans-NIH policy on how to most effectively fund investigations with both HIV and non-HIV components with a certain percentage of HIV/AIDS dollars from the OAR and non-HIV/AIDS dollars from the NIH ICOs.

The implementation science task force will consider important questions and ways to partner with agencies within HHS and with other agencies and departments, such as the Office of the Global AIDS Coordinator, to help implement research advances in HIV treatment and prevention. The implementation task force will also identify ways to combine behavioral and social science research methods to help implement biomedical interventions for HIV prevention and treatment across the lifespan. The proposed task force of the OAR will allow for the outline of creative and innovative strategies to translate NIH research findings to positive health outcomes.

Adjourn

Dr. Gandhi adjourned the meeting at 3:10 p.m. on July 18, 2017.

Certification

I hereby certify that, to the best of my knowledge, the foregoing summary complete.	minutes are accurate and
	10/09/2017
Monica Gandhi, M.D., M.P.H.	Date
Chair, NIH Office of AIDS Research Advisory Council	
Professor, University of California, San Francisco, CA	
-S –	10/06/2017
Elizabeth Church, Ph.D.	Date
Executive Secretary, NIH Office of AIDS Research Advisory Council	
OAR, DPCPSI, OD, NIH	