

COVID-19 Virginia Working Group Meeting 8/14/2020

Old Business/Updates

- Evie Smith and Jessica Kenyon joined from the Conafay group for today's meeting to discuss the aims.
- We have a google drive folder for this group. Please let us know if you have trouble accessing it.
- Sarah provided updates on the Sentara data. We are currently working on a paper looking at inflammatory markers. More to come on further data as we gather it. Note that this dataset is only for patients who were admitted to Sentara hospitals, so in that regard it is not representative, though it may still offer valuable insights to guide our research.
- Amy followed up on a research agreement / DUA. EVMS legal contact is drafting that up currently. It would incorporate data sharing, IP, etc.

Review of R01 Aims with Conafay (Jessica Kenyon and Evie Smith)

- Jessica has reviewed the aims and provide comments back to Dr. Dodani.
- Jessica shared her overall thoughts. She noted that there was a strong focus on how we would evaluate factors contributing to COVID-19 health disparities, but we need more development as to how we want to *respond* to those disparities, including more development of the data and methodology. She also noted that the scope of project seemed very large. She suggested that drilling down to a smaller set of factors that would be more actionable might strengthen our aims. It might be helpful to focus on a specific area of health disparities. If there is space, after the aims, we may want to include some statements on impact, as well as *why this team*, and *why now*.
- We really need to hone in on which specific piece of this we want to focus on and how to derive actionable next steps. We need to demonstrate feasibility.
- It may be beneficial to bring more focus to how this research can drive specific interventions.
- One option would be to frame this as a *piece* of something larger, which could support why we plan to collect data across so many areas.
- We can frame why it is valuable to examine this wide array of variables in order to discern what is most strongly driving a certain primary outcome. We could identify what *level* of predictor tends to be influencing outcomes most strongly in order to guide potential interventions.
- We may need to be more specific on what our *outcome* is. We say "health disparities," but do we need to define exactly what health disparities specifically.

- For this R01 the group may need to choose one specific topic, but still describe the registry more broadly, as this ongoing work would strengthen our position. This would also demonstrate that the team has already been working together.
- If we can add more of the “how” to each specific aim, that would be helpful. We could move some of details under “hypotheses” to be more focused on methodology. Rather than just identifying the factors, we want to be more strategic about the factors in order to bring the focus to how this could guide further interventions.
- More depth, less breadth. We will re-organize the aims accordingly.
 - What outcomes very specifically do we want to zero in on? What aspects of health, and what aspects of disparities?
- Jessica suggested re-visiting the FOA and looking at the areas of interest from the different institutes on the call.
- Brain suggested a possible framing for a re-structuring of the aims:
 1. Document disparities in [X outcome to be defined by group] across the state of VA and how those disparities are changing over time?
 2. Mediation analysis.
 3. Policy/programmatic conclusions for future interventions.
- Dr. Dodani will send revised aims to Keith, Brian, Amira, and Becky Sutter for further ideas on narrowing down the outcome of interest. Then HADSI will work to revise the aims accordingly. We will then share again with Jessica.

Registry update

- Josh Edwards updated the group that the IRB was submitted last Friday. They are actively reviewing and hopefully we should get final approval early next week.
- Representatives from GMU, Vibrent, and EVMS met this morning to discuss marketing strategies. They plan to get all three organizations’ marketing groups together early next week. If possible, we would like to have some of the investigators on that call as well. Amy will send out an e-mail regarding scheduling. They will have a regular marketing group meeting on Friday mornings.

Action Items:

Dr. Dodani will send the aims to Keith, Brian, Amira, and Becky Sutter for further input on narrowing down the outcome. Once the key outcome has been decided, HADSI will work to revise the aims accordingly. We will then share again with Jessica.