

HIV/AIDS Network Coordination Quarterly Report

Q1 2007: June 1, 2007 – August 31, 2007

Submitted September 28, 2007

This quarterly report covers cross-network coordination objectives and activities carried out by the cross-network committees and working groups and the HIV/AIDS Network Coordination Office during the period of June 1, 2007 – August 31, 2007. The HANC office works under a contract agreement between the Division of AIDS of the National Institute of Infectious Diseases (DAIDS) and the Fred Hutchinson Cancer Research Center. The programmatic lead for HANC activities is Dr. Jim Kublin. The HANC mission is to support the science and operations of the DAIDS-funded global HIV/AIDS clinical trials networks by increasing efficiency and resource-sharing through cross-network coordination of critical activities.

HANC SUPPORT ACROSS ALL COORDINATION AREAS

HANC Web Portal

The HANC Web Portal, a robust system for online collaboration, was launched in late March and early April 2007 to replace the StudySource static website that had served as a source for cross-network information since December 2005. The HANC Portal utilizes Microsoft Office SharePoint Server 2007 technology and currently includes a document management system; discussion and collaborative areas (blogs, wikis, and discussion boards); calendaring and announcements; databases; and a cross-network directory (which will be linked to the DAIDS-ES Master Contact system in October 2007). Currently 391 individuals have received HANC Portal user accounts. Eighteen secure team sites have been established for specific cross-network committees and working groups and are being used for collective document development, online discussion, and sharing of documents and information. Custom tools have been developed to meet specific needs identified by the training and laboratory cross-network groups. These include:

- Tools and workspaces to capture cross-network training requests, inform users of available regional trainings, and offer access to on-line trainings. The portal also provides a library of training modules.
- A Proficiency Testing Tracking tool and site captures laboratory proficiency testing data and manages work flows so that appropriate contacts are notified of proficiency testing failures, feedback is collected and sites can be notified in a single communication of multiple network responses.

Requests to Access the Clinical Research Support (CRS) Contract

The CRS contract between DAIDS and PPD can be accessed by the Networks to fund a variety of clinical research support tasks. Requests for CRS services that apply across Networks are made through the HANC office. 14 cross-Network CRS requests have been submitted since the CRS contract was initiated. Since March 2007, HANC staff submitted 4 new CRS requests. These included a request for support for Risk Reduction Counseling curriculum development; a request to secure reduced pricing agreements for high-cost ViroSeq and Trugene Genotyping kits; a request for monthly cross-network rounds via teleconference; and GCLP training for laboratory personnel in Lausanne, Switzerland. Of these new requests, one was not approved and 3 were approved and are in process. Details of these CRS requests can be viewed from a link on the HANC Portal homepage, which also contains an online CRS request submission form.

SPECIFIC AREAS OF CROSS-NETWORK COORDINATION

The HANC office currently facilitates cross-network coordination activities related to Scientific Leadership, Laboratories, Logistics and Training, Community Participation and Education, Statistics and Data Management, and Performance Evaluation.

Network Leadership and Oversight of Coordination Activity

The AIDS Clinical Trials Network Leadership Operations Group (NLOG) and the AIDS Clinical Trials Network Strategic Working Group (SWG) are cross-network bodies established by DAIDS that the HANC office participates in and helps support. The NLOG is charged with implementing and advancing optimal collaborative clinical trials research activities among the NIH-sponsored HIV/AIDS clinical trials networks. This group considers crucial operational and scientific questions to drive collaborative efforts among the networks and other research partners and oversees the coordination of common activities across the networks. The NLOG makes recommendations to NIAID and DAIDS regarding resource allocation that would improve efficiency within and across networks. Since 2006 HANC has facilitated monthly teleconferences for the AIDS Clinical Trials Network Leadership Operations Group (NLOG) to consider Leadership-level coordination issues and provide oversight to the overall coordination activity. Three NLOG calls have been held since March 2007.

The AIDS Clinical Trials Network Strategic Working Group (SWG), facilitated by DAIDS, is a working group of ARAC that is intended to provide strategic review and planning for the coordinated research efforts of the NIAID-funded HIV/AIDS clinical trials networks. The SWG provides input on strategic issues that cut across all six HIV/AIDS clinical trials networks, including overall priority setting for research plans, assessment of research opportunities and coordinated strategic planning across the networks. The working group is convened periodically to review and discuss cross-network issues as well as specific scientific plans, progress and opportunities. The SWG held its second meeting June 27-28, 2007 in Washington D.C. This meeting focused on SWG operating principles, community involvement in pluripotent clinical research sites, planning the HPTN research agenda, the MTN 003 protocol, and discussion of acute infection. HANC also facilitated 5 focused monthly conference calls since March 2007 with the six Network Principle Investigators to address cross-cutting network leadership issues.

Laboratory Coordination Objectives and Activities

Four cross-network laboratory committees and working groups are actively working on specific laboratory coordination objectives. The groups include the Lab PI/Manager Committee, the Lab Focus Group, the Immunology quality Assurance Working Group, and the TB Diagnostics Working Group. In April 2007 the Lab Focus Group (LFG) was formed to convene 2-4 times per month via teleconference and address on an accelerated timeline some of the issues raised at the Laboratory Management Meeting in August 2006. These included lab initiation and assessment, transition plans for CTU support activities, specific issues around international site labs, and further clarification around the Total Quality Management program. A TB diagnostics working group including SMILE, CDC, ACTG and HANC members was first convened in March 2007 to discuss and address questions regarding TB diagnosis that came up related to ACTG protocol A5221. Collection of TB laboratory information from A5221 international sites to determine labs used, QA conducted and willingness for a SMILE site visit was completed. As a result, SMILE visits to conduct hands-on assessments were scheduled for 4 sites. Pursuing a more coordinated international approach to TB diagnostics for DAIDS-funded studies is the next step for this group. Beyond the formation of these new working groups, during this quarter the following progress was made in support of major laboratory objectives:

Laboratory Objective 1: Maintain a structure and processes for consistent communication and access to critical information across the Network Core Laboratory Programs.

- Network Lab PIs, Network Lab Managers and DAIDS Clinical Laboratory Oversight Team (DCLOT) members convene on a monthly Lab PI/Manager teleconference to identify and address laboratory training, operations, and support issues that apply across Networks, and review progress and discuss issues raised by topic-specific working groups.

- A decision was made to postpone an annual face-to-face meeting of Laboratory PIs, Laboratory Managers, DAIDS Laboratory program staff, and key contractors/partners until spring 2008 to coincide with joint Network meetings.
- The Lab Focus Group assigned a Primary Network Laboratory (PNL) contact for international sites to streamline communication regarding proficiency testing (PT) issues.
- HANC staff developed laboratory coordination teamsites on the HANC Portal as a platform for communication and a tool for the coordination of laboratory activity. These teamsites are being utilized by the working groups for communication and review and tracking of laboratory issues such as proficiency testing results and associated corrective action.
- A lab database on the HANC Portal has been developed which currently contains information on bar-coding equipment, laboratory staff contacts, affiliated Networks, and location. This database may be integrated with the DAIDS-ES master contact system at some point and be expanded to contain additional parameters useful to the Network Core Laboratories, such as an inventory of laboratory equipment, assays conducted, and access to operating procedures.

Laboratory Objective 2: Establish standard quality assurance across networks and other partners through the further development and implementation of a Total Quality Management Program.

- The Total Quality Management plan proposed in late 2006 included the formation and facilitation of Quality Assurance Working Groups for each of the areas of laboratory quality assurance that involve the networks.
 - Immunology Quality Assurance (IQA) and Safety Lab Quality Assurance working groups were formed in 2007. Monthly IQA teleconferences continue to be held and provide a forum to discuss and determine how best to address CD4 proficiency testing issues identified by the IQA and UKNEQAS at international labs. Performance guidelines have been developed and the process for enrolling/discontinuing Network non-US CD4 labs in the UKNEQAS program has been clarified.
 - The Safety Lab QA working group calls were suspended in April 2007 while the Lab Focus Group worked with SMILE to address safety lab proficiency testing communication issues. In consultation SMILE and the LFG defined the role of the PNL in assisting sites in the preparation of Investigative Reports for CAP failures and drafted a cross network communications plan for safety PT problems and failures.
- The Lab Focus Group worked with HANC staff to develop and implement a web-based cross-network PT Deficiency Response tool which allows the Networks to coordinate their responses and provide sites with a single summary of the network responses to a PT failure. This will allow for timely coordinated responses to potential problems, transparent tracking of issue resolution, and the ability to track and respond to trends over time. Additional tools are being pursued to expedite data capture to facilitate review of the data and decrease the manual data-entry by the PNL contacts.

Laboratory Objective 3: Harmonize laboratory processes and procedures to reduce redundancy, increase efficiency and clarify expectations, especially at shared site laboratories.

- The Lab Focus group came to consensus on the role of the PNL in purchasing and distributing IATA training CDs.
- Develop consensus protocols for assays that are shared across the networks. A consensus PBMC processing SOP is currently in development and comparative studies are being conducted to determine if there are critical differences between the consensus SOP and that used by external partners such as CHAVI for specific procedures involved.

- Work with the Cross-Network SDMC Committee on LIMS-LDMS issues such as standardizing common data items used to identify specimens across networks will be addressed in the second quarter.

Community Coordination Objectives and Activities

Community Partners (CP) is a cross-network body charged with promoting effective representation of the many communities within which the DAIDS-sponsored HIV/AIDS Clinical Trials networks conduct research. CP will harmonize community-related practices within the networks as well as with external stakeholders to facilitate coordination of community-based activities. The HANC Community Partners Project Coordinator serves as a non-voting member of CP and provides group facilitation, project coordination, fiscal oversight, and administrative support.

Community Partners Objective #1: Develop and implement Community Partners membership and operations. Strategies and activities undertaken during this quarter to support this objective include:

- Community Partners membership and operational processes were finalized and implemented. The first Community Partners (CP) call was convened on June 6, 2007.
- Strategy: Develop CP member internal communications through improved access to interactive online tools. In response HANC staff developed a webinar (live online training) designed for new teamsite users in community groups and conducted 6 webinars, 2 per community group. In response to feedback from users, some individual online training and assistance was provided. User surveys, document libraries, forms, and wiki options were developed as tools on community sites on the HANC Portal. HANC staff also surveyed Community Partners membership on internet accessibility and program requirements to address potential technical issues.
- Strategy: Develop relationships within cross-network leadership groups and increase awareness of CP within relevant community groups. Two interim CP representatives provided an excellent introductory presentation on CP at the June 27-28 SWG meeting. CP expects to complete selection of new NLOG/SWG representatives by the end of September 2007. A one page summary of CP was developed for distribution to Network CABs and CWGs.
- Strategy: Identify CP activities that best support the mission and vision of the group. A draft CP work plan and budget were discussed on the August CP call; members provided edits to the work plan and objectives via the CP teamsite on the HANC Portal.

Community Partners Objective #2: Develop recommendations on providing community input into the planning and implementation of research activities. Strategies and activities undertaken during this quarter to support this objective:

- Strategy: Complete community recommendations document and references. A Community Recommendations working group (CRWG) is developing "Recommendations for Community Involvement in AIDS Clinical Research" based on the Best Practices work that the CCWG initiated. To date authors have drafted 3 of 6 recommendation sections, with remaining sections expected to be completed in September 2007. Case narratives from each Network have been collected and continue to be revised. The CRWG also participated in collaborative efforts with the AIDS Vaccine Advisory Committee on "Good Participatory Practice" guidelines document which has informed some revision of document sections.
- Strategy: Involve community in review process of document. CRWG members plan to discuss the process, goals and cost for distributing the recommendations document to appropriate network leadership and community groups in September 2007.

Community Partners Objective #3: Utilize the Community Training Working Group to coordinate and develop cross-network CAB training materials. Strategies and activities undertaken during this quarter to support this objective:

- Develop CAB training materials that are relevant across the six DAIDS-funded HIV/AIDS clinical trials networks. Members have collected over 40 resource documents and a document library to house them was created in a teamsite on the HANC Portal. A tool for reviewing resources for relevant content is in development. A sub-group of reviewers, mostly comprised of Network staff, have been selected to ensure that resource document versions are up to date and library metadata is accurate.
- Distribute CAB training materials to relevant network staff and community groups. The Community Training Working Group has examined public online document libraries to determine the best method for sharing resources within Networks and have consulted with IT staff regarding technology solutions that may be available.

Community Partners Objective #4: Identify, articulate and communicate scientific priorities of communities that are developed within the network community groups, areas of divergence from scientific researchers' priorities, and unaddressed issues or unmet community needs. Strategies and activities undertaken during this quarter to support this objective:

- Develop scientific priorities that reflect community needs and interests within the networks. CP work plan development and group discussion in September 2007 will further inform the process for development and review of scientific priorities.
- Develop methods and processes for ongoing communication of scientific priorities to network leadership groups and researchers. CP anticipates that methods and processes will be addressed by December 2007.

Training Coordination Objectives and Activities

Training coordination includes compiling and sharing the vast library of training materials already developed within networks, identifying common Core Competencies, and collaborating on the development of new standardized training modules that are applicable across networks. The following working groups were put in place by the Cross-Network Training Committee to actively develop specific cross-network training: Safety and EAE Working Group, Admin-Fiscal Working Group and (in conjunction with Community Partners) the Community Training Working Group. The Cross-Network Training Committee continues to identify high priority areas that will address network and Clinical Trial Unit (CTU) training needs. Two additional working groups, the Risk Reduction Counseling working group and Research Methodology working group, are currently being formed to begin moving these curricula forward.

Training Objective #1: Develop and enhance common safety training modules. Strategies and activities underway in the first quarter to support this objective:

- The Safety and EAE working group is focusing on safety evaluation and reporting including broadening safety assessment training with a focus on EAE, attribution and case studies. This WG has partnered with several DAIDS Medical Officer's to assist in the development of these efforts and to continue discussing different training methods and topics within safety during their monthly call and via email.
- A standardized on-line and CD-ROM EAE training module is currently in development. These materials are coming from a separate contract under the RAB/RCC office.

- A generic Attribution Training module is in development for networks to modify as needed when providing attribution training in-network. HANC is also working with DAIDS towards the possibility of making CE credits available for this training in addition to other trainings.
- A CRS request has been approved and funded for the Safety and EAE working group to prepare and share complex adverse case presentations during monthly grand rounds via teleconference. Final plans will be put in place in the September. Access to these presentations and discussions will be made available to CTU clinical staff, including nurses and physicians, to assist in their clinical decision making.

Training Objective #2: Develop a modular fiscal and administrative training program to help research administrators meet minimum NIH standards. The Cross-Network Admin-Fiscal Training Working Group was tasked in 2006 with developing an administrative & fiscal training program for CTU staff to meet minimum NIH standards. The working group developed an administrative and fiscal specific training Needs Assessment and CRS contract funding was obtained for distribution and compilation of data into a report. The Admin-Fiscal working group met face-to-face May 2-3, 2006 to review the data, prioritize training needs identified in the report, and plan for curricula development. Strategies and activities underway in the first quarter to support this objective:

- Learning Objectives via PPD were compiled for the following priority modules: Travel, Personnel, Facilities and Administration Costs, Grants and Record Tracking, NIH policy, Budget and Justification, Managing Subcontracts/Consortium Agreements, Close-Out, Applying Cost Principles, Modifications and Restricted Funds.
- Two modules (Grant Close-out and Applying Cost Principles) have been submitted to PPD to place into a training format.
- PPD provided the technical plans for these two modules to the Admin-Fiscal WG. The plans were reviewed and approved in July with minor changes by the WG. (Content is still being gathered for all other modules.)

Training Objective #3: Develop a centralized communication process for scheduled domestic and regional trainings and managing training requests. Strategies and activities underway in the first quarter to support this objective:

- On-going discussion between HANC, DAIDS and the cross-network Training Committee in developing a cohesive communication plan that will effectively disseminate information about upcoming trainings.
- HANC will serve as the central source responsible for communicating upcoming training opportunities offered by PPD to appropriate audiences (training committee, site laboratory personnel, etc.) using email alias lists created by HANC and the networks as well as online announcements.
- A training request mechanism on the HANC portal was launched in August to capture, evaluate and track resolution of all training requests from networks and CTUs in a timely and transparent fashion. A decision was made that network training representatives on the cross-network Training Committee will be the main point of contact for submitting requests on behalf of their affiliated sites.

Training Objective #4: Develop and provide access to cross-network standardized training for high priority topics including risk reduction counseling, research methodology, Good Clinical Practice (GCP) and Human Subjects Protection (HSP). At a December 2006 meeting, the cross-network Training Committee identified a number of high priority topic areas for additional coordinated training development. Strategies and activities underway in the first quarter to support this objective:

1. Risk Reduction Counseling (RRC) training development:

- HANC and the cross-network Training Committee submitted a CRS request and proposal to fund these efforts that was approved and funded in August 2007. A RRC working group was formed composed of members from across the networks with expertise in RRC for prevention and therapeutic trials.
 - An initial meeting was held mid-August in Seattle to begin the planning process. The entire RRC working group will convene in early fall at a 3 day F2F meeting to kick off the work.
2. Research Methodology training development:
- In August 2007 a decision was made to postpone the formation of this working group as resources and staff time are currently focused on the RRC training development. It was also brought to the Training Committee's attention that there seemed to be a variety of training materials on this topic already in development. HANC doing some research to determine if these training materials will suffice; once this information is available the Training Committee will revisit the need to address this topic.
3. Good Clinical Practice (GCP) and Human Subjects Protection (HSP) online training module development and access:
- Online HSP and GCP training was made available through the Collaborative Institutional Training Initiative (CITI) at the end of May 2007 to all DAIDS-funded networks and their clinical trial sites as an efficient method to meet the requirements of the DAIDS training policy. As of the end of this quarter, approximately 300 staff have completed the online courses in both HSP and GCP training.
 - Spanish translation for the GCP curriculum has been funded by the HANC office and will be available in the second quarter. Once the Spanish translation is complete the HANC office will provide funding for the GCP curriculum to be translated into Portuguese and French.

Training Objective #5: Develop a long-term plan for implementing standardized training across the networks. Strategies and activities underway in the first quarter to support this objective:

- The Training Committee has begun discussing the possibility of developing "learning communities" to provide the resources and local expertise necessary needed to train staff in a particular region.
- The Training Committee has also continued discussions around how to provide training materials in variety of formats and how to expand and continue compiling training documents in an online library that can be accessed by site staff from the DAIDS funded networks.
- The Training Committee is beginning to review best practices in training and is looking to gather data that will evaluate staff knowledge of training opportunities, uptake of training and satisfaction with training outcomes. This data will be considered along with resource availability and identified training needs in specific areas will assist us in guiding planning for a long-term training program.

Site Management & Clinical Trials Logistics Coordination Objectives and Activities

Site management and oversight, harmonization of clinical trial logistics and operations at the site level across the networks has been identified as an area of potential high priority for coordination in the second year of the grant period. Although this is an area of coordination with great potential for harmonization, HANC has not yet convened a working group to identify objectives, nor have we initiated any site management & clinical trials logistics activities, in part because DAIDS is still in the process of developing an Office of Clinical Site Oversight (OCSO) and any cross-network activities in this area will need to be undertaken in close collaboration with this nascent unit. Once OCSO is established and functioning, HANC will be working with them to pursue the initial exploratory objectives listed below and described in detail in the HANC Strategic Work Plan.

- Site Management & Clinical Trials Logistics Objective #1: Develop a Cross-Network Committee focused on Site Management and Clinical Trials Logistics Coordination.
- Site Management & Clinical Trials Logistics Objective #2: Identify and prioritize coordination objectives and activities to pursue that will add value for the networks, sites and DAIDS.

HANC is also collaborating with the Admin/Fiscal leadership across the networks to develop common cross-network protocol costing templates. This is not intended necessarily to mandate one template for all protocols, but to identify areas/modules that can be applied to cost specific activities. To initiate this effort, HANC has:

- Collected and reviewed elements of costing out protocols and current methodology/templates that the networks use for proposing site and core costs.
- Developed a short-term plan with the Networks for future activity.

SDMC Coordination Objectives and Activities

The network Statistical and Data Management Centers (SDMCs) have identified key areas in which the sharing of expertise, resources, and procedures will strengthen the capacity and increase the efficiency of SDMC operations. A DMC Harmonization Committee has been established to address the objectives outlined in the HANC work plan. In the first quarter the DMC committee convened 4 full-group conference calls and held additional small-group meetings to make progress on Objective #1 and Objective #5 described below.

SDMC Objective #1: Establish Information Technology Best Practice Standards at Division of AIDS Clinical Trials Study Sites and Affiliated Laboratories. As DAIDS network sites and laboratories often receive funding from multiple sources, it is common for sites to share their infrastructure (including data-acquisition devices) for different studies across different networks. In spite of the commonality of multi-network utilization, there are currently no common strategies for establishing a technological standard at sites, or insuring that changes made to a site's technical infrastructure by one network won't negatively impact the work being done by another. The DMC Committee has agreed on the importance of developing a mechanism that: reviews the current IT Infrastructure at each site; identifies the optimal standards achievable for that site given its location and financial and personnel resources available; communicates recommended improvements to all networks affiliated with that site; and implements necessary improvements in a way that does not "break" essential systems at any networks involved.

Strategies and activities undertaken during this quarter to support this objective:

- HANC and the SDMCs worked to establish a set of baseline technological standards (specifying both the minimum and ideal requirements) for sites and laboratories, both domestic and international, in the following categories: Power Stability/Reliability; Anti-virus/Spyware protection; Data and telecommunications; Local-Area Network; Centralized File and Applications Server; Data Backup/Recovery and Disaster Recovery Plan; Security; and IT Training, Documentation and SOPs/WPGs. These standards were documented in an "IT Best Practice Standards" document that was drafted, reviewed, discussed, and finalized by representatives from SCHARP, FSTRF, and CHAVI. The final IT Best Practice Standards document will be taken to DAIDS as a documentation of IT recommendations to be considered for all DAIDS-funded sites and affiliated laboratories.
- Following finalization of the IT Best Practice Standards document, the SDMCs have begun discussions to identify the appropriate representatives from the network SDMCs, CHAVI, DAIDS, and any other relevant partners that should make up the oversight body that will monitor and regulate the IT standards outlined in the document. It is anticipated that this body will be well-defined by the end of Quarter 2.

- In addition to defining the composition of the oversight body for IT standards at DAIDS-funded clinical trial sites and affiliated laboratories, the SDMCs have begun discussions to define the process for a coordinated channel of communication surrounding technological issues among this oversight body. This process has included: identifying which changes to IT structure at sites/labs require review and comment by the oversight committee; identify the best communication tool to propose/share IT changes that might be relevant across networks and knowledge areas; identify the best way to document these discussions and outcomes in order to compile an IT history for each site/lab. It has been determined that the information collected at site visits conducted at sites/labs by DMC IT staff will inform these processes.

SDMC Objective #5: Coordination of Resource Allocation for DMC Activities with DAIDS Study

Sites. There continue to be questions surrounding who is responsible for covering costs associated with DMC activities at DAIDS study sites. The purpose of this objective will be to establish a standardized plan for allocating resources for DMC activities in order to clarify the party responsible for costs, and help sites plan for what items should be included in their budget request to DAIDS.

Strategies and activities undertaken during this quarter to support this objective:

- The HANC office began with initial discussions with SCHARP to document the current year's resource allocation for DMC activities with DAIDS-funded clinical sites and affiliated laboratories. These discussions included identifying large categories of resource allocation, current allocation scenarios, the preferred allocation scenario, and all activities that do not have clear resource allocation responsibilities identified; this resulted in a table of resource allocation for DMC activities.
- Following the initial draft of the SCHARP resource allocation activities, two calls were convened with FSTRF to discuss the current FSTRF resource allocation scenario for DMC activities in efforts to standardize Resource Allocation for DMC activities with DAIDS study sites. However, after several discussions with both the full SDMC Committee, and smaller follow-up calls between the HANC office and FSTRF, it was determined that FSTRF does not see the need for harmonization of resource allocation standards across the DMCs.
- The HANC office then offered to continue to support SCHARP in their efforts to better identify and standardize their resource allocation activities across the sites and laboratories that they provided SDMC support to.

In the second quarter the DMC Committee will expand their focus to address additional objectives listed below (full descriptions can be found in the HANC Strategic Work Plan):

- SDMC Objective #2: Establish a "Data Exchange Standards" book that describes the necessary structure for data interchanges of Assays, Inventories, and Manifests
- SDMC Objective #3: Complete Laboratory Data Systems Harmonization (Build upon Laboratory Harmonization Efforts between FSTRF and SCHARP; Multi-LIMS Manifest Harmonization)
- SDMC Objective #4: Harmonization of MedRA Coding

Evaluation Coordination Objectives and Activities

A Cross-Network Evaluation Committee was established in December 2004 to identify and address opportunities for harmonizing network and site evaluation activities. Evaluation Committee members began by sharing their evaluation handbooks, which include performance measures and standards. DAIDS has subsequently contracted with Concept Systems Incorporated (CSI) to develop an Evaluation System for DAIDS and its funded research programs. HANC has worked with DAIDS and CSI to collect and synthesize Network input for the DAIDS Network Evaluation Project, and involve the Networks and the cross-Network committees and working groups in the project.

The Evaluation Objective #1 in the current HANC work plan is to work with CSI and DAIDS to review the data generated by CSI project activities and participate in developing an evaluation framework, metrics and processes. In the first quarter the following activities have taken place:

- We had thought that the Cross-Network Evaluation Committee would reconvene in summer 2007 to review the concept maps, however instead teleconferences between CSI and each Network were held to share the results of the concept maps developed from CSI information-gathering activities.
- Cross-Network Evaluation Committee calls have been suspended awaiting the formation of an Evaluation Management Task Force (EMTF) that will be responsible for providing detailed, technical input about indicators, tools, resources and potential measures to be considered for use in the development of the evaluation system plan. It is our understanding that Evaluation Committee members will participate in the EMTF, as well as representatives from DAIDS and a representative from Community Partners. It is expected that the EMTF may convene initially via teleconference in the second quarter with a face-to-face meeting planned for January 2008.