Welcome (Meng K. Lee, Chair)
- Meng K. Lee called the meeting to order at 6:17 PM.
- Meng stated that the meeting did not reach quorum and therefore no voting could occur and no motions could be approved.
- Meng stated that the meeting will be recorded. There were no objections.

Approval of Agenda and Minutes (Meng K. Lee)
- Since there was no quorum, there was no motion to approve the agenda and minutes.

Annual Retreat Part 2 – Steering Committee Activities in FY2018 (Gwen Crider, Retreat Facilitator)
- Meng introduced Gwen Crider to continue facilitating the Steering Committee’s (SC) discussion on SC activities in Fiscal Year 2018 (FY2018) that was left unfinished from the retreat.
• For discussion details, see report of SC Retreat.

**Data Collection (Meng K. Lee)**

• Since the meeting had not reached quorum, Meng wanted to use the time to discuss AAHI’s data collection since it had come up at the October retreat. Meng wanted the SC members to evaluate AAHI’s data collection efforts and determine whether the process needed to be changed or if the data currently being collected best satisfied data needs.

• Nguyen responded that before the discussion ensues, it is important to consider why data is being collected and what purpose it serves.

• Perry Chan shared that AAHI has a lot of data collection tools used for different projects. He suggested that it might be more helpful to provide a presentation at a future meeting about AAHI’s data collection efforts. Once a shared understanding of AAHI’s data collection efforts is established, it will be easier to assess the current efforts.

• Wilbur Friedman stated that some data collection is likely required for Perry to demonstrate program performance to his bosses. Additionally, AAHI’s data is largely inputs (i.e. we distribute this many pamphlets), but we do not know how many people saw a healthcare provider or how many illnesses were prevented.

• Meng recommends that the Program Support Subcommittee works with AAHI to look at data collection.

• Nguyen voiced his concern that before the conversation moves forward, the SC needs to determine what it wants and why. After that, the subcommittee can work to execute that goal. Data collection is timely and burdensome and if data is being collected without any specific reason, the data is not useful. He suggested the SC provides Perry with some specific questions about AAHI’s data collection and then allow Perry to respond to those questions and present at a future meeting.

• Meng responded that the first task will be to review the current data collection practice and tools and then identify the necessary content of that data (i.e. age, gender, ethnicity, etc…)

• Sam Mukherjee noted that the data collection process should be simple and easy for the community. Additionally, it would be good to collect some data on the community’s views about mental health in some indirect way.

• Perry stated that he agreed with Nguyen’s earlier comment about needing to identify the purpose of the data and how it would be used. Answering these questions will make it easier to determine what data to collect.

• Sam wanted to revisit Judy Wang’s earlier comments. Using data from other states with similar Asian American demographics, like California, can give AAHI a jumpstart in satisfying data needs.

**ACTION ITEM:** AAHI will present on their data collection efforts at an upcoming SC meeting.
• Nguyen suggested the SC sit down with the new Public Health Officer and get his insight on the purpose of data collection, the types of data that should be collected, and the design of data collection efforts.

• Meng asked Perry if he is satisfied with AAHI’s current data collection efforts.
  o Perry answered that he is satisfied with the data which AAHI collects, but he is not satisfied with the data available at other levels like the county and national levels. The comments and observations shared by the SC members are all valuable, but should be targeting the larger data collection efforts and systems that exist at County level. The data which AAHI collects can all be found in their annual reports. AAHI data is used to hold the program accountable, to setup program goals, to prove success, and to prove impact.

• Judy provided a few comments.
  o There is some data which AAHI will not be able to collect, such as mental illness prevalence data. That sort of data is best collected by health care providers.
  o Depending on how soon AAHI needs data to demonstrate health needs, it is likely that they will need to utilize available data sets from regions with similar demographics.
  o Since the data being collected at the County level is not satisfying AAHI’s needs, could these programs work with AAHI more closely?
    ▪ Perry responded that Healthy Montgomery (HM) should be a major partner when it comes to improving County level data collection.
    ▪ Nguyen agreed with this approach and shared that HM is moving towards being seen as the County’s data hub. At the last HM SC meeting, he commented on the lack of Asian American relevant data available.

• Meng suggested that perhaps the aim should instead be to identify the shortcomings of the County’s data collection and what is needed for the Asian American community.
  o Sam agreed and shared that at another recent meeting, Asian American relevant-data was also not captured. Asian American needs are commonly overlooked.

• Perry recounted that the next steps should be to identify the overall data collections efforts in the County and then find the data gaps. He requested a workgroup from the SC to work with him on these two efforts. The workgroup will review the last published HM Needs Assessment, identify the gaps, and provide advice on improvements in data collection for the next HM Needs Assessment.

• Meng shared that it is important to also look at the data being collected by County programs. It is important to have access to different data points, such as how many Asian Americans utilizing County services need language support.

ACTION ITEM: Perry will share the HM Needs Assessment to steering committee.

• Perry will get in touch with Betty to see if someone from the Department of Health and Human Services (DHHS) can provide an overview of the
Department’s data collection effort. However, the answer that the person gives will be broad because of the size of the Department.

**ACTION ITEM:** Perry will get in touch with Betty for someone to provide an overview of the data collection effort from DHHS.

- It was agreed that the starting place should be HM.
  - Nguyen suggested picking a few issues or areas that are important to AAHI and then discussing how AAHI’s work can support this area or vice versa.
  - Meng responded that the SC needs to first decide what data is important to them.

**ACTION ITEM:** Perry will send out the HMSC Needs Assessment.

- The guidelines were not discussed because there was no quorum.

**Updates from Boards, Committee, and Commission (BCC)**
- This was not discussed because there was no quorum.

**Other Business**
- This was not discussed since there was no quorum.

**Adjourn (Meng K. Lee)**
- Meng adjourned the meeting at 8:06 PM.

**ACTION:** Meeting adjourned at 8:06 PM.

**Next Meeting:** TBD