GET TESTED. TREAT EARLY. STAY SAFE.

Let's End AIDS, Capital District.

NEW YORK STATE Department of Health
Ending the Epidemic in New York State

WELCOME

North-Eastern New York Regional Group
March 8th, 2017
Building the Perfect System
“Every System is Perfectly Designed to get the Results it gets”  Paul Batalden

Improving HIV Care in Albany
“If you can’t describe what you are doing as a process, you don’t know what you are doing.”

~ W. Edwards Deming
New York State Cascade of HIV Care, 2015

Persons Residing in NYS† at End of 2015

Estimated HIV Infected Persons: 122,000
92% of infected

Persons Living w/ Diagnosed HIV Infection: 112,000
74% of infected
81% of PLWDHI

Cases w/any HIV Care during the year*: 90,000
61% of infected
66% of PLWDHI

Cases w/continuous care during the year**: 74,000
62% of infected
67% of PLWDHI

Virally suppressed (n.d. or <200/ml) at test closest to end-of-year: 75,000
83% of cases w/any care

* Any VL, CD4, genotype test during the year; ** At least 2 tests, at least 91 days apart
†Based on most recent address, regardless of where diagnosed. Excludes persons with AIDS with no evidence of care for 5 years and persons with diagnosed HIV (non-AIDS) with no evidence of care for 8 years.
The 17 Counties of the Albany Ryan White Region

- Essex
- Franklin
- Hamilton
- Delaware
- Clinton
- Otsego
- Warren
- Greene
- Fulton
- Saratoga
- Albany
- Washington
- Columbia
- Schoharie
- Montgomery
- Schenectady
- Rensselaer
- Delaware
- Greene
- Columbia
Cascade of HIV Care: Albany Ryan White Region

Persons Residing in the Albany Ryan White Region† at End of 2015 (excludes prisoner cases)

- Estimated HIV-Infected Persons‡: 3,380
- Persons Living w/Diagnosed HIV Infection: 2,940
- Cases w/any HIV care during the year*: 2,310
- Cases w/continuous care during the year**: 1,920
- Virally suppressed (n.d. or <200 copies/ml) at test closest to end-of-year: 2,050

†Based on most recent address, regardless of where diagnosed. Excludes persons with AIDS with no evidence of care for 5 years and persons with diagnosed HIV (non-AIDS) with no evidence of care for 8 years.
‡ 13% were infected and unaware (CDC estimate)
* Any VL, CD4, genotype test during the year; ** At least 2 tests, at least 91 days apart
### Cascade of HIV Care: Albany Ryan White Region

**Persons Residing in the Albany Ryan White Region† at End of 2015 (excludes prisoner cases)
2014 compared to 2015**

<table>
<thead>
<tr>
<th>Metric</th>
<th>2014</th>
<th>2015</th>
</tr>
</thead>
<tbody>
<tr>
<td>Estimated HIV-Infected Persons‡</td>
<td>3,130</td>
<td>3,380</td>
</tr>
<tr>
<td>Persons Living w/ Diagnosed HIV Infection</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Cases w/any HIV care during the year*</td>
<td>2,230</td>
<td>2,310</td>
</tr>
<tr>
<td>Cases w/continuous care during the year**</td>
<td>1,920</td>
<td>1,920</td>
</tr>
<tr>
<td>Virally suppressed (n.d. or &lt;200 copies/ml) at test closest to end-of-year</td>
<td>1,950</td>
<td>2,050</td>
</tr>
</tbody>
</table>

†Based on most recent address, regardless of where diagnosed. Excludes persons with AIDS with no evidence of care for 5 years and persons with diagnosed HIV (non-AIDS) with no evidence of care for 8 years.
‡ 13% were infected and unaware (CDC estimate)
* Any VL, CD4, genotype test during the year; ** At least 2 tests, at least 91 days apart
Getting to ETE

• Break into teams of experts
• Each team meets to discuss processes for the following:
  – Testing and Linkage
  – Early Engagement and Retention
  – Viral Load Suppression
Introductions
• Your organization
• Your name
• Your title
The “Cascades” Spring to Life!!!
Each Team will designate a recorder to draw a process flow map for each step in the cascade

- Teams review the current process steps for linkage, engagement/retention, and viral load suppression, drawing a process flow map for each of these areas.
- Each team identifies ways that these processes can be improved, streamlined or strengthened by eliminating unnecessary steps, adding steps or improving steps.
- Put the improved processes together into a single process flow that begins with testing and culminates with suppression.
- Goals for each step should be: Linkage to care within 7 days or less, (ideal linkage in 5 working days or less), people engaged in care as evidenced by at least 1 visit in past 12 months, people are virally suppressed.
OR

• Using their current knowledge, teams create from scratch a perfect system of steps for linkage, engagement/retention, and viral load suppression, drawing a process flow map for each of these areas.
• Each team identifies each step of the process, using as many steps as necessary.
• Create a single process flow that begins with testing and culminates with suppression.
• Goals for each step should be: Linkage to care within 7 days or less, (ideal linkage in 5 working days or less), people engaged in care as evidenced by at least 1 visit in past 12 months, people are virally suppressed.
LINKAGE PROCESS DIAGRAM

Stuff Happens Here

- ER Testing
- Testing
- Community Testing
- Warm Hand Off
- Linkage to Care
- Referral to Care
Things to Consider

– What are the human interactions in each process?
  – Internal Staff
  – Consumers
  – Leadership
  – External Providers
  – County and State DOH

• What would be the best practice interactions that make up the process steps of each segment?
Complicating Factors

• Laws are tough to change but can be
• Policies are hard to change but can be
• Procedures can be changed and adapted
• Behaviors can be changed but may take time
• Beliefs can be changed as well
• Bias and Stigma may be impediments
• Insurance may create delays
If You Build it They Will Come
Combine your plan

• Each team should be able to combine the three pieces to have a single process map for their ideal system
If You Share it They Will Steal
Share your plan

• Each team will present their combined process map
What comes next?

• Aim
• Innovation (process changes)
• Hypotheses
• Work plan
  – Who
  – What
  – When
  – Where
Perfect System Wrap Up: Summation

Steve Sawicki
ETE Update
Welcome to NY Links

NY Links focuses on improving linkage to care and retention in care and supports the delivery of routine, timely, and effective care for Persons living with HIV/AIDS (PLWHA) in New York State. We also bridge systemic gaps between HIV related services in order to achieve better outcomes for PLWHA through improving systems for monitoring, recording, and accessing information about HIV care in NYS. We use a regional approach, utilizing the learning collaborative model, to fortify the links holding together communities of practice, and the links grounding them in the communities of consumers they serve.

New York Links was created through a HRSA HIV/AIDS Bureau (HAB)-sponsored Special Projects of National Significance (SPNS). Since September of 2015 it is under the Governor’s Ending the Epidemic Initiative through the NYSDOH AIDS Institute.

+ New York Links Ryan White Conference Presentations

+ New York Links Poster Presentations at the National Ryan White HIV/AIDS Conference

New York State Ending the Epidemic Initiative

On June 29, 2014, Governor Andrew M. Cuomo detailed a three-point plan to move us closer to the end of the AIDS epidemic in New York State. The goal is to reduce the number of new HIV infections to just 750 (from an estimated 3,000) by 2020 and achieve the first ever decrease in HIV prevalence in New York State.

The three-point plan:
1. Identifies persons with HIV who remain undiagnosed and link them to health care.
2. Links and retains persons diagnosed with HIV in health care to maximize virus suppression so they remain healthy and prevent further transmission.
3. Facilitates access to Pre-Exposure Prophylaxis (PrEP) for high-risk persons to keep them HIV negative.

Ending the Epidemic (ETE) in New York State will maximize the availability of life-saving, transmission-interrupting treatment for HIV, saving lives and improving the health of New Yorkers. It will move New York from a history of losing the most HIV epidemic to the country to a future where new infections are
QOC/Cascade Building Questions
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• Blog at http://linkandretain.wordpress.com/

• Website at http://www.newyorklinks.org