NY Links Special Projects of National Significance (SPNS)

Systems Linkages and Access to Care

OCT. 24. 2012: WNYS REGIONAL GROUP'S SECOND LEARNING SESSION **NEWSBRIEF**

The second meeting of the NY Links Western New York State Regional Group was held on ***Wednesday, October 24th, 2012****.*

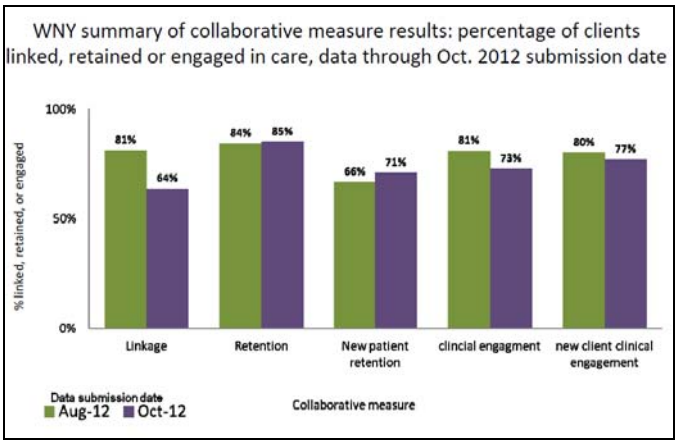
This newsbrief provides an overview of the topics discussed, a review of the group work, and important next steps and resources.

We would like to thank everyone who attended the meeting, all presenters, and our dedicated planning committees.

MEETING PARTICIPANTS

- **25** Participants Representing **9** Agencies (4 from Buffalo, 5 from Rochester)
- **5** Representatives from the Erie and Monroe County Health Departments
- **9** AIDS Institute and other SPNS Staff
- **39 Total**

Carol-Ann presents a Cascade Comparison of NYS and the US



A slide from Diane Addison's presentation showing the aggregate data for each WNYS Collaborative Measure

IMPORTANT RESOURCE

All resources from ***NY Links*** *and the* ***Western New York Regional Group*** *can be found online at:*

NewYorkLinks.org

Key Presentations Summary

All ppts are available for download on our website.

My Story: In and Out of Care

Mario Thelemaque

Mario opened the meeting with his heartfelt account of falling in and out of care over the last few years. He shared that the 3 things that worked to re-engage and retain him in care:

- Staff who did not punish him for being inconsistent with his care
- Social workers that went the extra mile to find him
- Securing and stabilizing other factors in his life: housing, mental health, etc.

Building Partnerships

Byron Kennedy, PhD, MD, MPH

Dr. Kennedy outlined the role of the Monroe County DOH in linking and retaining PLWHA in care in the region. He advocated the use of Memorandums of Understanding to improve communication among agencies and cross-agency collaboration that most effectively and efficiently improves outcomes for the clients.

Inferences about HIV Care from New York State Surveillance Data: Entry, Continuity, Success

Carol-Ann Watson

Carol-Ann presented a discussion of the HIV epidemic in Buffalo, Rochester, and New York State in relation to each other, to the national epidemic, and in the context of the National HIV/AIDS strategy goals.

NY Links Evaluation Strategy

Diane Addison, MIA, MPH

Diane related an overview of the NY Links evaluation strategy and the early linkage and retention intervention strategies shared by providers through the Baseline Survey. She also presented the WNY collaborative reporting completeness and measure results for the August and October data submissions.

Drilled Down Data

Nanette Brey Magnani, the Quality Consultant for the WNYS Collaborative, introduced the QI activity of drilling down data to collaborative participants during the Rochester and Buffalo Workshops held in September. Participants drilled down their data for a measure of their choice in advance of the Learning Session and shared their findings with the group. This generated very interesting discussions including data collection strategy sharing and identifying opportunities for cross-agency collaboration among the providers and County Department of Health staff in the room.

If you have not drilled down data yet and would like to, please use the following simple steps:

a) choose a NY Links measure to drill down
b) identify the clients/patients who were not linked or retained for the measure
c) categorize the clients/patients by the reason they were not linked/retained
    a. You may use the reason they gave you if that information is available, or the primary reason you believe based on case notes, past history, etc.
    b. You may use established categories that your agency uses or those that Matt Crehan Higgins used in the table below
    c. If possible, add the average VL for the clients/patients in each category

Using this method to identify a specific area of focus for a QI intervention ensures that the intervention targets a high-need group and will have a significant impact.

Other immediate benefits of drilling down data are often seen as well. For example, Shawntrell Miles from Anthony Jordan Health Center shared that her agency had already benefitted from the drilled down the data internally. Shawntrell shared the data with the Case Workers and they were reminded of some clients that they had not realized they lost contact with. Through this process the Case Workers were able to plan and implement outreach efforts for these individuals in a quick and timely manner.

Reason	Number of Patients Total: 134	Average VL
Returned to clinic at the end of the reporting period, working with staff on past barriers	40	7336
Unknown – can't reach them due to changed contact information	18	7833
Medically stable – feel well; doing well on treatment, generally state desire to come in as needed; counseled on continued need for monitoring	13	21
Employment – cite difficulties coming to appts due to work schedule	6	258
Disclosure/confidentiality issues – report difficulty coming to clinic due to concerns about who they will see and who will see them	1	20
Ongoing alcohol/substance use- Continued use creates barrier to attendance to medical and other obligations	14	32194
Mental Health- Continued mental health issues create a barrier to attendance to medical and other obligations	8	15044
Insurance instability Since resolved, created temporary issue	1	20
Disengaged/lack of buy-in Staff has successfully contacted the patient but pt does not express understanding of importance medical follow up	13	27436
Family obligations Cite obligations to family, generally care of young children and elderly patients	1	20
Hospitalized off site Long admission to another local health facility	0	
Incarcerated <90 days Not incarcerated long enough to meet exclusion criteria, but did miss appointments as result	2	2210
Refuses treatment Patient expresses they do not wish to continue treatment/medical follow up	3	4942
Dually located:	1	20
Transportation	1	415211
Ongoing Utility/financial	1	272
Other medical issues	1	20
Plans to relocate/transfer	5	26
Housing instability	1	20

ECMC Drilled Down Data of Measure 2A: Retention
1075 Total Pts, 118 Excluded, 957 Retained, 134 Not Retained

Shawntrell Miles, Anthony Jordan Health Center Presents Drilled Down Data of Measure 2A: Retention

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Consumer Involvement in NY Links

Consumer Involvement facilitates direct participation and identification of consumer priorities for healthcare programs. A multi-disciplinary quality team, including consumer(s) drives implementation of the quality plan and provides high-level comprehensive oversight of the quality program. This involves reviewing performance measures, developing work plans, chartering project teams, and overseeing progress. Consumer representation on the team should be part of a formal engagement process where consumer feedback is solicited and integrated into the decision making process. The team should have regularly scheduled meetings, meeting notes to be distributed throughout the program and a team chair or chairs. Through NY Links, the New York State Department of Health AIDS Institute expects that every provider include at least one consumer in their multi-disciplinary SPNS QI team.

"NYS has taken the lead for consumer involvement in quality improvement. I issue a challenge to the providers who are here without consumers: by the spring learning session, please identify an individual who you can bring along for the consumer perspective."
--Julian Brown, Jr.

"If health or healthcare is on the table, the patient/consumer must be at the table, every table. Now!"
--Lucian Leape Institute

As service providers we are well aware of how the numbers play out…but when we involve the people we seek to serve we really get a sense of the personal experience that affects our ability to keep people in care and to work toward keeping their virus under control. Until we hear from them directly about their experience, we're really just making assumptions.
--Matthew Crehan Higgins, ECMC

If you would like technical assistance in the integration of consumers into your QI team, please contact Dan Tietz, Manager of Consumer Affairs at det01@health.state.ny.us or 518.473.7542.

To familiarize yourself with consumer involvement, please review the following powerpoint from the Institute for Healthcare Improvement: "Encouraging Patient Engagement and Participation" and the Organizational Assessment for Consumer Involvement in QI.

Performance Measurement

Next Data Submission:

December 3, 2012

REMINDER! Measure your program's progress in improving linkage and retention in HIV clinical care using the NY Links Database. Measure domains include: (1) linkage; (2A) retention; (2B) new patient retention; (3A) clinical engagement; (3B) new client clinical engagement.

ACCESS THE NY LINKS DATABASE NOW
NewYorkLinks.org/database/

If you have any questions regarding the measures or would like to request technical assistance in data collection or quality performance measurement, please email Annelise Herskowitz at axh18@health.state.ny.us

Important Contacts

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