NEW YORK CITY’S EFFORTS TO MAKE DATA TO CARE MORE EFFICIENT: LESSONS FOR OTHER JURISDICTIONS

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KEY TERMS / RESOURCES

- Search engines
  - Worker Connect (New York City only) – Client level data from participating Health and Human Services agencies
  - Homeless services – Housing and temporary emergency shelter to those in need
  - Parole system check – Incarceration and parolee information
- People search - Lexis-Nexis, USPS, Google, etc.
- Electronic Clinical Data - Live clinical data
  - Regional Health Information Organization (Healthix/RHIO) – health information exchange system
  - New York State Electronic HIV Management System (NYEHMS)
- New York City Social Service Agency – Provides social services to persons diagnosed with HIV
BACKGROUND

DATA TO CARE
DATA TO CARE *

- The utilization of HIV surveillance data to identify persons living with HIV (PLWH) presumed out of care (OOC) or never in care (NIC) for linkage to care efforts

DATA TO CARE IN NEW YORK CITY

- Implemented in 2008
  - Field Services Program - Field Services Unit (FSU)
    - Outreach to identified PLWH who have been out of care for ≥ 9 months
    - Outreach to identified NIC PLWH who have never been in care ≥ 6 months since diagnosis (implemented early 2013)
    - Elicit/notify HIV-exposed partners
DATA TO CARE INEFFICIENCIES

- NYC Registry – care status in NYC only
- Reporting lags - most recent lab(s) may not always be immediately available
- Hard to identify care status for PLWH whose labs are not drawn at time of medical visit
- PLWH presumed OOC may actually be current with care
- Individuals may have moved and are out of jurisdiction (OOJ)
- Wasted resources tracing PLWH not needing linkage to care
WORKFLOW

Step 1: Presumed OOC
PLWH selected from the HIV surveillance registry

In Care
OOC

Died
OOJ

Step 2: Pre-field Checks

Non-OOC

OOC

Step 3: Assign, investigate, and disposition

Presumed OOC PLWH
AIM

- Improve efficiency – Reduce the number of identified PLWH current with care or out of jurisdiction assigned for linkage to care outreach
  - Exclude non-OOC PLWH’s at an earlier phase through frequent systematic matches, and utilizing other available data sources
METHODS
Beginning January 2016 - Systematic matching performed monthly to create several line lists of patients

Presumed OOC PLWH from the surveillance registry are matched against:

- New York City Surveillance lab data – Assess care and vital status
- New York State Surveillance Registry (eHARS) – Assess care status outside NYC
- Social Services agency for PLWH – Ascertain current residency, or vital status if possible
- Internal FSU database – remove those recently investigated

All client lists are matched against each other for deduplication
ANALYSIS

- Preliminary data from January 2016 - April 15, 2016 calculated and compared to 2013 - 2015 data
- Clients grouped into respective years according to date of case investigation
- Outcomes: Total located, confirmed out of care, current with care, and OOJ
RESULTS
# CASES ASSIGNED AND INVESTIGATED

<table>
<thead>
<tr>
<th></th>
<th>2013-2015</th>
<th>2016*</th>
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<tbody>
<tr>
<td>Cases investigated</td>
<td>2912</td>
<td>742</td>
</tr>
<tr>
<td>Total number of patients located</td>
<td>2409</td>
<td>83%</td>
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* Includes cases currently ongoing
PRESUMED OOC PLWH IN 2013-2015 VS. 2016

- Confirmed OOC: 60% (2013-2015), 66% (2016)
- Current with Care: 24% (2013-2015), 22% (2016)
CONCLUSION
SUCCESSFUL DATA TO CARE* IMPLEMENTATION

Quality Data
NYC Surveillance Data

Address areas of weakness
Missing data elements augmented - pre-field checks
Frequency of data matches
Ongoing evaluation of methods

Utilize other data sources
NYS Registry
Social Services dataset
Internal Database

*Source:
LESSONS LEARNED

- Frequent systematic data matching was useful in identifying PLWH for linkage to care efforts
- Reduce the number of presumed OOC PLWH who were already in care, or OOJ
- Able to identify a larger proportion of PLWH truly OOC, and thereby improve efficiency
- Social service data proved useful in identifying patients who are NYC residents

Limitations:

- Short duration of data for comparison
- No access to sources beyond NYC and NYS thus, will always have people who do not need outreach services
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Has no real or apparent conflicts of interest to report