

Using Quality Improvement Data to Address Disparities in Healthcare Outcomes

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Overview

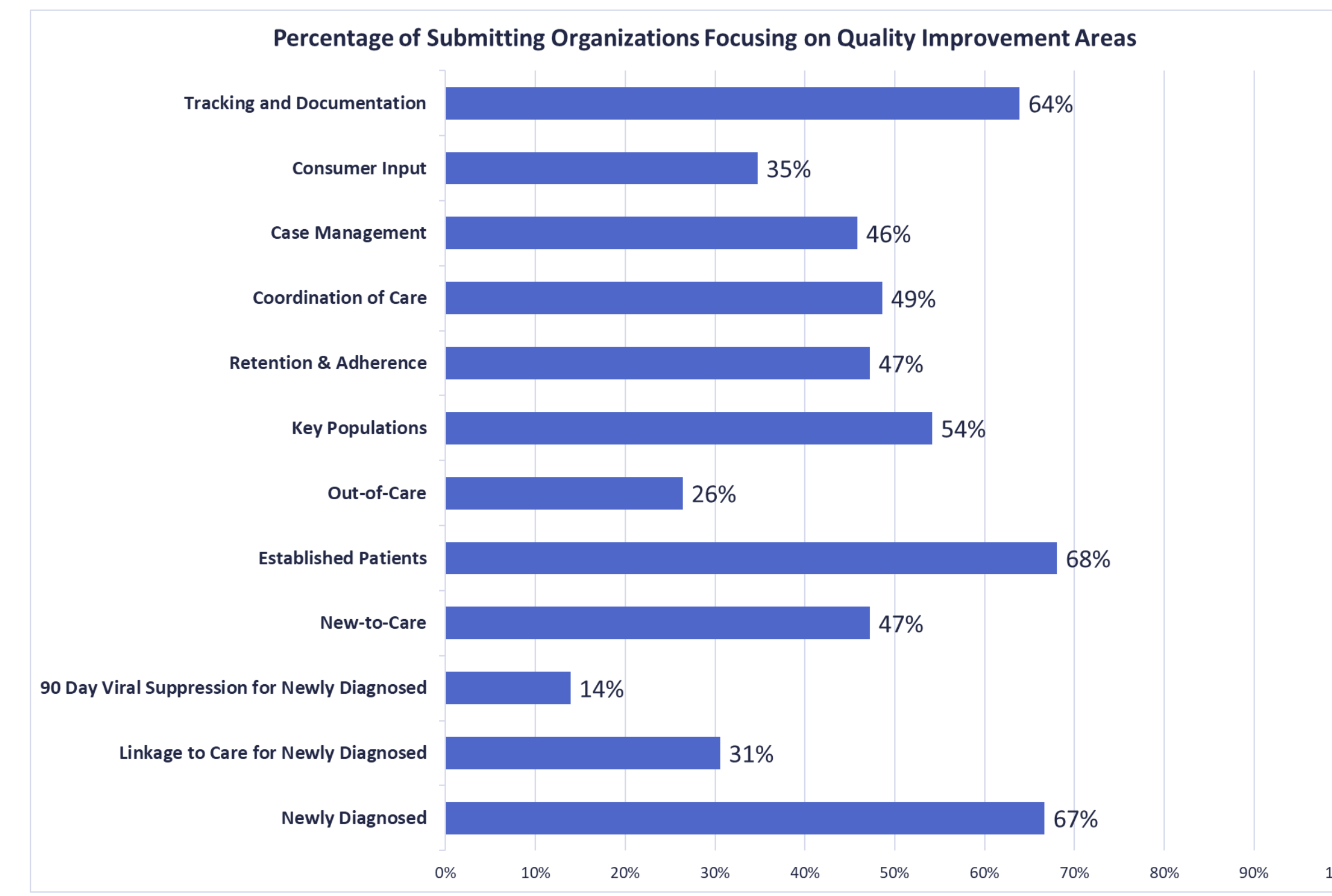
An important part of the New York State Department of Health's Ending the Epidemic Initiative is to improve HIV viral load suppression rates since undetectable viral load has been shown to improve health outcomes and prevent the transmission of HIV. To this end, the Office of the Medical Director's Quality of Care Program asks all HIV medical providers in New York State to perform an annual quality of care review. As part of the 2019 annual HIV Quality of Care Program Review, organizations were expected to complete the Organizational HIV Treatment Cascade Data Submission Excel Template for care provided in 2018. The results of their submission show improved rates of viral load suppression (VLS) on average. Benchmark reports created for established HIV care patients show clinic averages for anti-retroviral (ARV) prescription at 97%, viral load testing at 95%, and suppression on final viral load at 82%. Quality improvement (QI) data suggest a link between these outcomes and QI activities, simultaneously submitted through the Data Submission Excel Template.

The Data Submission Excel Template included a section to input patient-level data, a section for visualizing cascade indicator results as charts and tables (automatically generated from the provided patient-level data), and a section for the organization's methodology, key findings, and quality improvement plan, including consumer involvement and updates on recent QI projects and stigma reduction activities. Using the template, providers were able to access results by age, sex, gender, race/ethnicity, risk factor and housing status presented in graphic form to illuminate areas for additional improvement focus. After analyzing review results, providers then developed QI plans in collaboration with consumers and submitted them as part of the review. Their planned quality improvement activities are categorized and presented in aggregate. Targeted QI activities implemented in 2017 to address disparities in specific subpopulations are also presented in conjunction with improved VLS rates for those subpopulations in 2018.

Key indicators:

- Prescription of ART during the review period
- Viral load test within the review period
- Suppression on final viral load during the review period (previously diagnosed patients)
- Suppression within 91 days of diagnosis (all newly diagnosed patients)
- Linkage to care within 3 days of diagnosis (patients newly diagnosed within the organization)

2019 QI Plan Areas of Focus

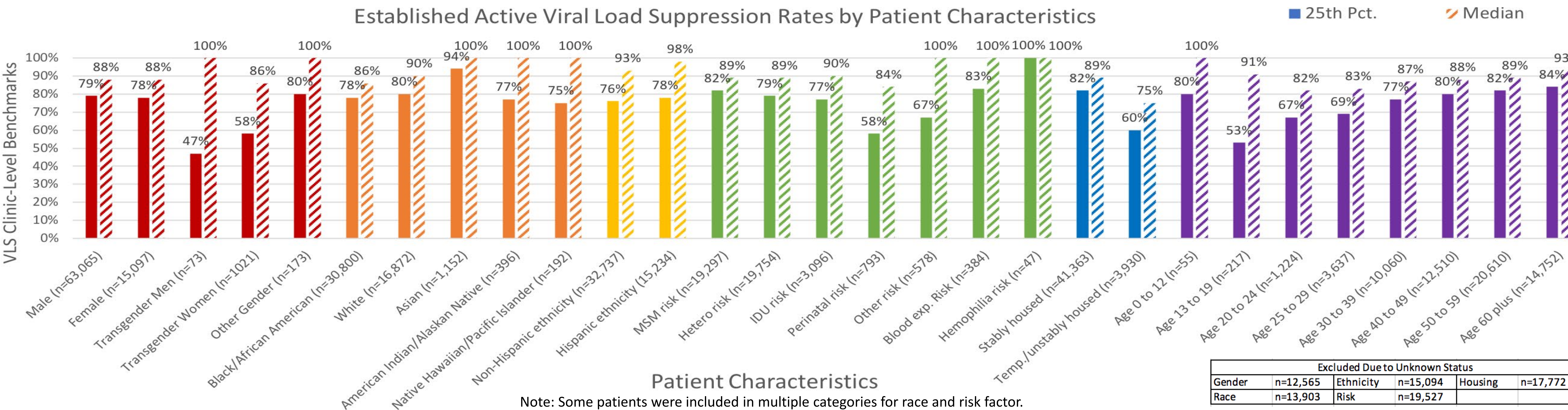


Participating Organizations

Organization	Areas of Focus											
	Newly Diagnosed	Linkage to Care for Newly Diagnosed	90 Day Viral Suppression for Newly Diagnosed	New-to-Care	Established Patients	Out-of-Care	Key Populations	Retention & Adherence	Coordination of Care	Case Management	Consumer Input	Tracking and Documentation
Acacia Network												
Albany Medical Center												
Apicha Community Health Center	+	+	+									
Arnot Health												
Bedford Stuyvesant Family Health Center, Inc.												
Betances Health Center												
Brightpoint Health	+											
BronxCare Health System - Department of Family Medicine	+	+	+	+	+	+	+	+	+	+	+	+
Brookdale University Hospital Medical Center	+	+	+	+	+	+	+	+	+	+	+	+
Brooklyn Plaza Medical Center, Inc.												
Brownsville Community Development Corporation	+											
Care for the Homeless												
Center for Comprehensive Health Practice												
Community Health Project, Inc.												
Cornerstone Family Healthcare	+	+										
Crystal Run Healthcare												
Daman Family Care Centers	+	+										
East Harlem Council for Human Services, Inc.	+	+	+	+	+	+	+	+	+	+	+	+
Ellis Medicine	+	+	+	+	+	+	+	+	+	+	+	+
Erie County Medical Center												
Harlem United												
Housing Works	+											
HRHCare Community Health	+											
Hudson Headwaters Health Network												
Institute for Family Health	+											
Interfaith Medical Center	+	+	+	+	+	+	+	+	+	+	+	+
Jamaica Hospital Medical Center	+	+	+	+	+	+	+	+	+	+	+	+
Jordan Health	+	+	+	+	+	+	+	+	+	+	+	+
Joseph P. Addabbo Family Health Center	+	+	+	+	+	+	+	+	+	+	+	+
Kingsbrook Jewish Medical Center	+	+	+	+	+	+	+	+	+	+	+	+
Maimonides Medical Center	+	+										
Medalliance Medical Health Services	+	+										
Mohawk Valley Health System	+	+	+	+	+	+	+	+	+	+	+	+
Montefiore Health System	+	+	+	+	+	+	+	+	+	+	+	+
Montefiore Mount Vernon Hospital	+	+										
Morris Heights Health Center	+	+	+	+	+	+	+	+	+	+	+	+
Mount Sinai Health System	+	+	+	+	+	+	+	+	+	+	+	+
Mount Vernon Neighborhood Health Center Network	+	+	+	+	+	+	+	+	+	+	+	+
New York-Presbyterian - Queens	+	+										
NewYork-Presbyterian - Brooklyn	+	+										
NewYork-Presbyterian - East	+											
NewYork-Presbyterian - West	+	+	+	+	+	+	+	+	+	+	+	+
Northwell Health - CART	+											
Northwell Health - CYAAPH	+	+	+	+	+	+	+	+	+	+	+	+
Northwell Health - Lenox Hill	+	+										
Northwell Health - SIUH	+	+	+	+	+	+	+	+	+	+	+	+
NuHealth												
NYU Langone Health - FHC	+	+										
Open Door Family Medical Centers and Foundation	+											
Project Renewal	+	+	+	+	+	+	+	+	+	+	+	+
Richmond University Medical Center	+	+	+	+	+	+	+	+	+	+	+	+
Rochester Regional Health	+	+	+	+	+	+	+	+	+	+	+	+
Ryan Network	+	+	+	+	+	+	+	+	+	+	+	+
Samaritan Health Systems	+	+	+	+	+	+	+	+	+	+	+	+
Settlement Health	+	+										
St. John's Riverside Hospital												
START Treatment and Recovery Centers	+	+	+	+	+	+	+	+	+	+	+	+
Stony Brook Medicine	+	+	+	+	+	+	+	+	+	+	+	+
SUNY Downstate	+	+	+	+	+	+	+	+	+	+	+	+
SUNY Upstate Medical University	+	+	+	+	+	+	+	+	+	+	+	+
Syracuse Community Health Center, Inc.	+	+	+	+	+	+	+	+	+	+	+	+
The Brooklyn Hospital Center	+	+	+	+	+	+	+	+	+	+	+	+
The Evergreen Association	+	+	+	+	+	+	+	+	+	+	+	+
Trillium Health	+	+	+	+	+	+	+	+	+	+	+	+
UHS	+	+	+	+	+	+	+	+	+	+	+	+
University of Rochester Medical Center	+	+	+	+	+	+	+	+	+	+	+	+
Urban Health Plan	+	+	+	+	+	+	+	+	+	+	+	+
VIP Community Services	+	+	+	+	+	+	+	+	+	+	+	+
West Midtown Medical Group	+	+	+	+	+	+	+	+	+	+	+	+
Westchester Medical Center Health Network	+	+	+	+	+	+	+	+	+	+	+	+
Whitney Young Health	+	+	+	+	+	+	+	+	+	+	+	+
Wyckoff Heights Medical Center	+	+	+	+	+	+	+	+	+	+	+	+

2018 Viral Load Suppression Rates* by Patient Characteristics

*Data obtained from annual AIDS Institute Quality of Care reviews



Excluded Due to Unknown Status			
Gender	n=12,565	Ethnicity	n=15,094
Race	n=13,903	Risk	n=19,527
		Housing	n=17,772

Note: Some patients were included in multiple categories for race and risk factor.

Impact of Targeted QI Activities* on Disparities in Viral Load Suppression Rates

*Selected from sites' quality improvement plan submissions

Organization	Subpopulation Targeted	2017 QI Activities	Established Active VLS from 2017-2018 for Subpopulation
Brightpoint Health (currently known as Hudson River Healthcare's NYC Division)	Unstably housed	Referring and enrolling patients in care coordination and care management services	+27% points (33% to 60%)
Housing Works	20-29 year-olds	Conducting targeted outreach via Youth and Prevention Services	+18% points (60% to 78%)

Organization	Subpopulation Targeted	Planned QI Activities	Goals for Subpopulation Established Active VLS in 2019
Brightpoint Health (currently known as Hudson River Healthcare's NYC Division)	Transgender patients	Increased referral and enrollment into Undetectables Program and RAP; partnership with CK Life to address barriers and social determinants of health for trans population	Increase from 46% to 51%
Northwell CART	Black/African American and Latina women	Develop U=U educational tool and measure patient understanding; monitor viral loads; create dashboard with metrics	Increase to 93%
SUNY Upstate Medical University	Hispanic/Latino patients	Referral to Spanish-speaking provider; switching patients to Upstate pharmacy to allow close care coordination and enhanced services	Increase by 5% points
University of Rochester Medical Center	Ages 20-29	Multidisciplinary team meetings to discuss efforts to help reduce barriers to visit and medication adherence; reminder phone calls one day prior to scheduled appointments; quarterly outreach calls for patients not seen in over 6 months	Increase from 79% to 83%

Conclusion and Next Steps

Organizational treatment cascades can help to identify disparities in healthcare outcomes. When combined with quality improvement methodology, and technical assistance coaching, significant improvements in crucial health outcomes such as HIV viral load suppression can be achieved for specific subgroups of patients. This can help to mitigate and potentially eliminate disparities in health outcomes. Organizations will continue to measure and revise process changes. The 2020 review of care provided in 2019 will reveal whether improvements made in 2018 have had the desired impact for specific patient subgroups. The 2020 cascade review will also suggest if improvement activities have had an organizational as well as a statewide impact on viral load suppression outcomes.