### Ending the HIV Epidemic through Rapid stART Community-Wide Implementation and Beyond

Presented By: Vanessa Cruz | Ricardo Fernandez | Julie Young

20

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RYANWHITE CONFERENCE ON HIV CARE & TREATMENT

## Disclosure – Clark County Social Service, Office of HIV



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## Disclosure – Arizona Department of Health Services



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### Arizona Department of Health Services





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Julie Young President/Network and Database Consultant

## **Learning Objectives**



- Engage all HIV service providers in implementing a community wide Rapid stART protocol.
- Extend CAREWare data beyond Ryan White providers.
- Address the Ending the HIV Epidemic initiative by implementing a Rapid stART community wide protocol.
- Facilitate Rapid stART standard data reporting for both RW and non-RW providers.
- Implement standard Rapid stART monthly reporting for Clinical Quality Management.





- Las Vegas Background & Priority Areas
- Southern Nevada Rapid stART Learning Collaborative Overview
- Rapid stART Module Development Process
- TriYoung Overview
- Rapid Start Fundamentals and Interface
- Clark County Standard Data Reporting
- Arizona Department of Health Services Background & Priority Areas
- AZDHS Rapid Start
- AZDHS Results
- Lessons Learned
- Q & A

## Las Vegas Background & Priority Areas



### Background:

- Las Vegas had three rapid linkage and ART programs offered to persons newly diagnosed with (HIV Rapid stART) when the Southern Nevada Rapid stART Learning Collaborative was formed.
  - O University Medical Center initiated in 2018
  - Southern Nevada Community Health Clinic initiated in 2019
  - Huntridge Family Clinic initiated in 2018

### Goal:

 Increase and improve access to Rapid stART initiation for persons newly diagnosed with HIV in Southern Nevada.

## Southern Nevada Rapid stART Learning Collaborative

### RYANWHITE CONFERENCE ON HIV CARE & TREATMENT

### Leadership

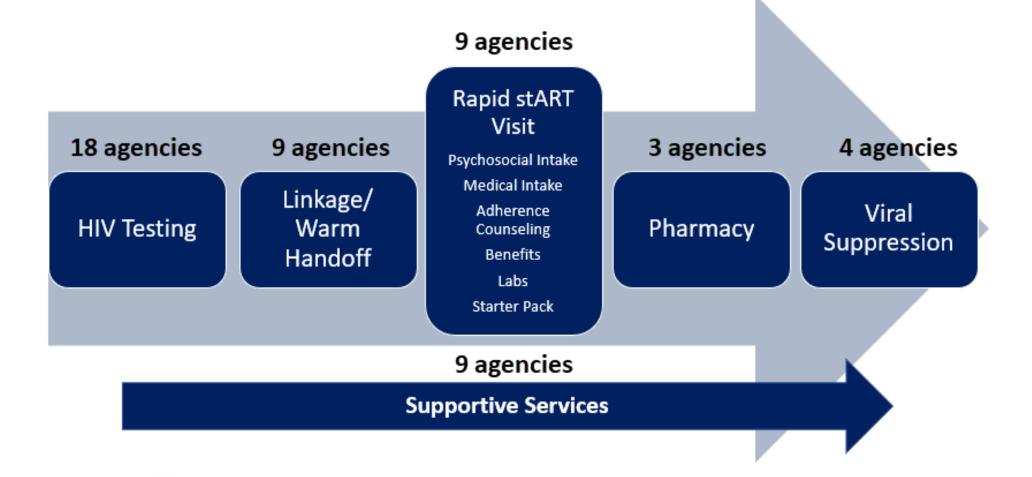
- Clark County Social Service, Office of HIV, Ryan White Part A Recipient
- Pacific AETC-NV
- University of California San Francisco (UCSF)

### **Community/Service Based Organizations**

- Access to Healthcare Network
- Carson City Health & Human Services
- Dignity Health
- First Med Health & Wellness Center
- Huntridge Family Clinic
- Southern Nevada Health District (SNHD) Annex A/Sexual Health Clinic
- Southern Nevada Health District (SNHD) Community Health Center
- Trac-B/NARES
- University Medical Center (UMC) Wellness Center

## Southern Nevada Rapid stART Service Continuum





## **Data Development Process**



### • UCSF

- Funding source
- Rapid stART Performance Measures Guidelines
- Coaching and support for Rapid stART intervention

### • TriYoung Inc.

- Program development
- o Data migration
- Technical support
- Clark County Social Service, Office of HIV
  - Lead agency for the Learning Collaborative
  - Coordination of agency technical assistance
  - Project management and implementation

## **Rapid stART Module**



- Connected directly and posts within CAREWare
- Uses the data that is required for RSR reporting
- Looking at clinical services and data
- Data Required Demographics **OHIV** Date • Referral Date – To indicate when the clinic became aware of client OMedical Visits **OViral Load Lab Results Data OART** Medication – Starter **Packs and Prescriptions**

# What are the desired outcomes?

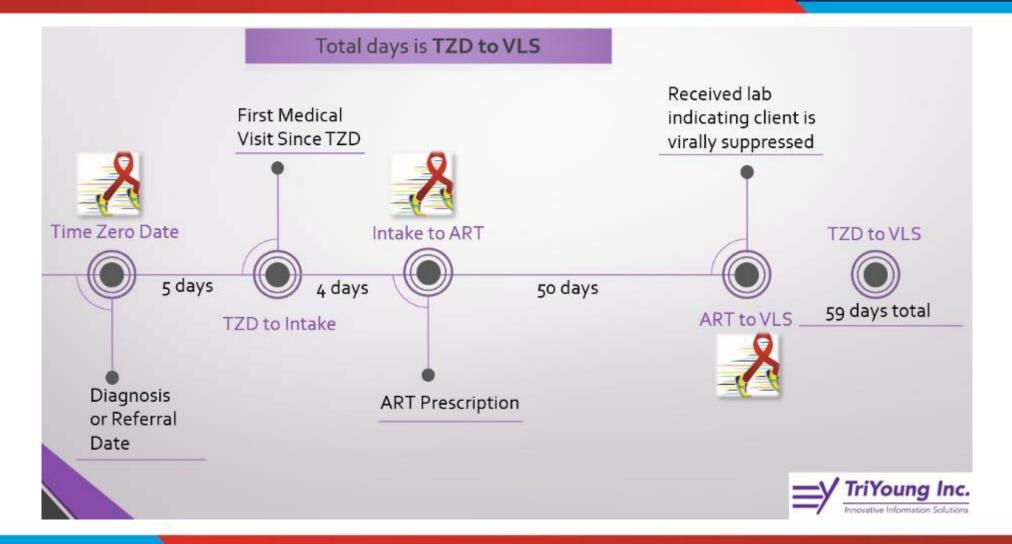


- **PM1**: Linkage to HIV medical care within 7 days of TZD
- PM2: Initiation of ART within 7 days
- PM3: Median days to Initiation of ART
- PM4: Viral load suppression within 60 days of ART
- **PM5**: Retention in care (two medical visits within the reporting period 90 days apart)

**Note:** Time Zero Date (TZD): Diagnosis date or referral source date. First date provider is aware of client.

### **Client Journey**





2022 National Ryan White Conference on HIV Care & Treatment

## **Training Needs**



- Program overview and data entry training conducted 30 days prior to launch
- User guides were distributed to agencies and users
- Instructional videos were implemented
- Continued one-on-one technical assistance to each agency
- On-going data team meetings are conducted monthly for troubleshooting and planning to onboard new agencies
- Dedicated ticket submission system for agency inquiries and/or troubleshooting needs

## TriYoung



### Background

- Founded in 1999 Phoenix, Arizona
- Information Technology Consultant
- Support of the Ryan White Program since 2000
  - Workflow Processes
  - CAREWare
    - Implementations
    - Integrations
    - Reporting
    - Web Application Extensions



## TriYoung



### Rapid Start Fundamentals

- **One Database**
- **o Secure client PII and PHI data**
- **O** Reduce training time
- o Increase accuracy and Data Completeness
- **o Minimize New Data Entry Requirements**

### Solution

**•** Utilize CAREWare with a Rapid Start Web Application



### https://simplebooklet.com/triyoungrapidstartbrochure

## **Rapid Start Interface**



### CAREWare Obscure PII Fields - Privacy

Find Client > Search Result	5	
View Details Custom Form	ns Back Print or Export	
Search Result	5	
Search:		
Last Name	First Name	DOB
XXQZSPWOVHZUEG	XXQZSP	1/1/2000
XXPFL	XXPFLGY	1/1/1990
XUVGPFCJ	XUVGPFCJHCFDJWKEQ	10/1/1980

### **Clinic Level Interface**

- Aggregate Summary
- Simple to Review / Update Details

	Me	<u>asure</u>	In Numerator	Not	In Numerator	Perce	<u>nt In Nun</u>	<u>nerator</u>							
<u>Select</u>	VIEW ALL		25	N/A		N/A		<u>Olassa</u>							
<u>Select</u>	Linkage to HI	V Medical Care	9	16		36%		Close	Decel	Ethnicity	Diserseis	Laba	Comisso	Medications	
<u>Select</u>	Initiation of A	RT	9	16		36%		Demographics	Race/E	thnicity	Diagnosis	Labs	Services	Medications	
<u>Select</u>	Retention In	Care	7	18		28%		URN		0110					
<u>Select</u>	Viral Load Su	pression	2	23		8%		Client First Name		0110	Middle	e Name			٦La
<u>Select</u>	Exclusions		5	N/A		N/A		Gender	Male	~	Vital S		Alive	~	
								Language	English				~		
	Last Name	First Name	URN		Patient Cate	<u>gory</u>	TZD								
Select				110	ewly Diagnos	ed	10/22/20	Residence City		State		Zip 54401		_	
Select				20	ewly Diagnos	ed	02/11/20			Kentucky	× ×	54401			
Select				4U	ewly Diagnos	ed	03/01/20	· · · · · · · · · · · · · · · · · · ·							
Select				-2U	ewly Diagnos	ed	11/15/20	Rapid Start Refer	rral Sour	се		Referra	I Source Da	ate 🔤 🗍	
Select				10	ewly Diagnos	ed	09/30/20								
Select				12U	ew to Care		05/24/20					22/2020			
Select				1U	ewly Diagnos	ed	03/17/20	Intake Date ART Start Date				22/2020			
Select				10	ewly Diagnos	ed	10/26/20					15/2020			
								Number of days f			0				

## **Rapid Start Jurisdictional Reporting**



## Real-Time Aggregate Reporting By Provider or County

	Denominator	TZD to Intake Numerator	TZD to Intake Percent	Intake to ART Numerator	Intake to ART Percent	Retention In Care Numerator	Retention In Care Percent	ART to VLS Numerator	ART to VLS Percent
Summary	22	8	36.36%	7	31.82%	7	31.82%	6	27.27%
County	Denominator	TZD to Intake Numerator	TZD to Intake Percent	Intake to ART Numerator	Intake to ART Percent	Retention In Care Numerator	Retention In Care Percent	ART to VLS Numerator	ART to VLS Percent
Unavailab	le 5	3	60%	3	60%	2	40%	3	60%
Boone	12	2	16.67%	2	16.67%	3	25%	1	8.33%
Brown	1	0	0%	0	0%	0	0%	0	0%
Marion	2	1	50%	1	50%	0	0%	1	50%
Putnam	1	1	100%	0	0%	1	100%	0	0%
St Joseph	1	1	100%	1	100%	1	100%	1	100%
Union	0	0	0%	0	0%	0	0%	0	0%

## FAQs And Tips (TECH)



Benefits of using the same Performance Measures throughout the jurisdiction.

- Accuracy and Standardization
- System Calculated Measures
- Integrated with CAREWare
- Ease of Use for all clinics

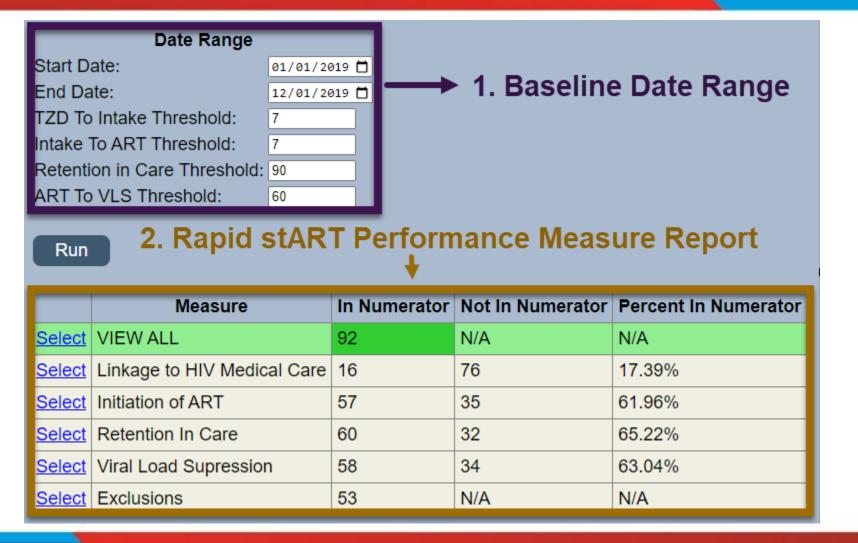
   Funded with Ryan White
   Private Clinics without Ryan White Funding

How do you use this data to advance your programs and Ending the HIV Epidemic goals?

- Codified reporting for all clinics
- Reporting detail and aggregate
- Real Time Analysis "Getting to Zero"
- Standard and focused CQM PDSA cycles

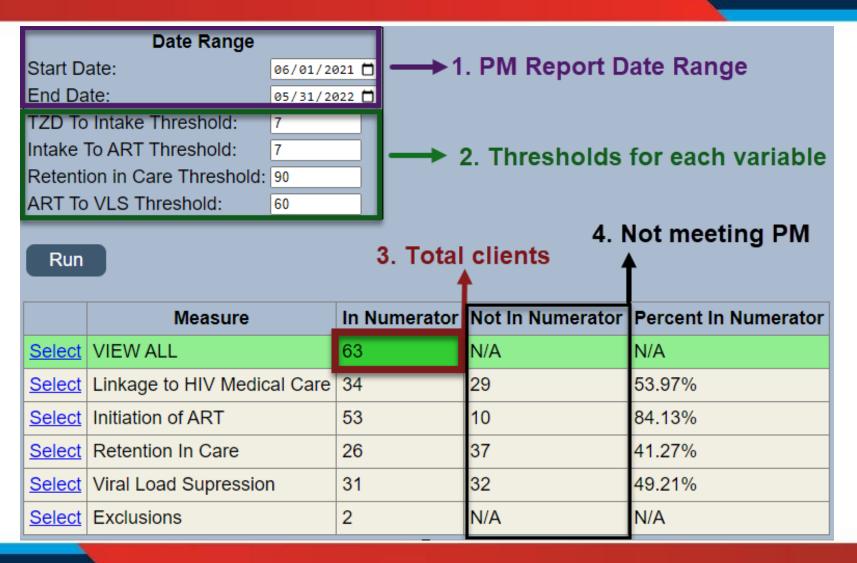
### **Clark County Standard Data Reporting – Baseline Data**





## Clark County Rapid stART Clinical Quality Measurement





### **Performance Measures Reporting Timeline**



#### **Timeline for Rapid stART Reporting**



Reporting Period	Data Entry/Import	Data Review	Data Reporting
December (1/1/2021-12/31/2021)	January 10 <sup>th</sup>	Jan 15 - Jan 31 <sup>st</sup>	February 10 <sup>th</sup>
January (2/1/2021-1/31/2022)	February 10 <sup>th</sup>	Feb 15 – Feb 28 <sup>th</sup>	March 10 <sup>th</sup>
February (3/1/2021-2/28/2022)	March 10 <sup>th</sup>	March 15 -March 31 <sup>st</sup>	April 10 <sup>th</sup>
March (4/1/2021-3/31/2022)	April 10 <sup>th</sup>	April 15 – April 30 <sup>th</sup>	May 10 <sup>th</sup>
April (5/1/2021- 4/30/2022)	May 10 <sup>th</sup>	May 15 – May 31 <sup>st</sup>	June 10 <sup>th</sup>
May (6/1/2021-5/31/2022)	June 10 <sup>th</sup>	June 15 – June 30 <sup>th</sup>	July 10 <sup>th</sup>
June (7/1/2021-6/30/2022)	July 10 <sup>th</sup>	July 15 – July 31 <sup>st</sup>	August 10 <sup>th</sup>
July (8/1/2021- 7/31/2022)	August 10 <sup>th</sup>	Aug 15 – Aug 31 <sup>st</sup>	September 10 <sup>th</sup>
August (9/1/2021-8/31/2022)	September 10 <sup>th</sup>	Sept 15 – Sept 30 <sup>th</sup>	October 10 <sup>th</sup>
September (10/1/2021-9/30/2022)	October 10 <sup>th</sup>	Oct 15 – Oct 31 <sup>st</sup>	November 10 <sup>th</sup>
October (11/1/2021-10/31/2022)	November 10 <sup>th</sup>	Nov 15 – Nov 30 <sup>th</sup>	December 10 <sup>th</sup>
November (12/1/2021-11/30/2022)	December 10 <sup>th</sup>	Dec 15 – Dec 31st	January 10 <sup>th</sup>
December (01/01/2022-12/31/2022)	January 10th	Jan 15 – Jan 31 <sup>st</sup>	February 10 <sup>th</sup>

## Clark County Rapid stART Clinical Quality Management Tool



Data Entry/Import by Date: June 10th								
Data Review: June 15 to June 30								
Data Reporting Date: July 10th								
Report Date:								
Report Done By:								
Reporting Period: 6/1/2021 to 5/	31/2022			EHE Goal:	EHE Goal: 90%			
Measure	In Numerator	Not In Numerator	% In Numerator	% Difference vs. Baseline	% Difference vs. EHE Goal	Baseline		
View All	63	N/A	N/A	N/A	N/A	N/A		
Performance Measure 1 (PM1): Linkage to Medical Care	34	29	53.97%	187.84%	36.03%	18.75%		
Performance Measure 2 (PM2): Initiation of ART	53	10	84.13%	36.89%	5.87%	61.46%		
Performance Measure 5 (PM5): Retention In Care	26	37	41.27%	-39.97%	48.73%	68.75%		
Performance Measure 4 (PM4): Viral Load Suppression	31	32	49.21%	-23.80%	40.79%	64.58%		
Exclusions	2	N/A	N/A	N/A	N/A	N/A		
Performance Measure 3 (PM3): Median Intake to ART*	0	N/A	N/A	N/A	N/A	N/A		

## **AZDHS – Rapid Start**



### • Overview of Rapid Start in Maricopa County, AZ

- Goal is to link newly diagnosed persons with HIV to HIV treatment within five calendar days of their HIV diagnosis.
- Network of medical clinics, HIV service providers, and Maricopa Department of Public Health support the project.

## AZDHS Results (1 of 3)



### Rapid Start 2019

Performance Measures	Results
Total Clients Served	319
Average Diagnosis to Intake (In Days)	7.5 days
Average Intake To ART (In Days)	3.5 days
Average ART to Viral Suppression (In Days)	36 days
Average Diagnosis to Viral Suppression (In Days)	69 days

## AZDHS Results (2 of 3)



### Rapid Start 2020

Performance Measures	Results
Total Clients Served	262
Average Diagnosis to Intake (In Days)	7 days
Average Intake To ART (In Days)	1.4 days
Average ART to Viral Suppression (In Days)	51 days
Average Diagnosis to Viral Suppression (In Days)	77 days

## AZDHS Results (3 of 3)

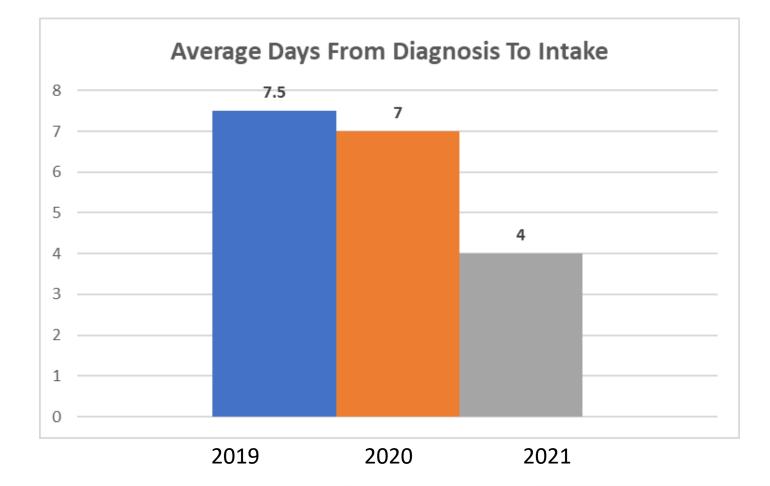


### Rapid Start 2021

Performance Measures	Results
Total Clients Served	259
Average Diagnosis to Intake (In Days)	4 days
Average Intake To ART (In Days)	4.4 days
Average ART to Viral Suppression (In Days)	24.8 days
Average Diagnosis to Viral Suppression (In Days)	38.6 days

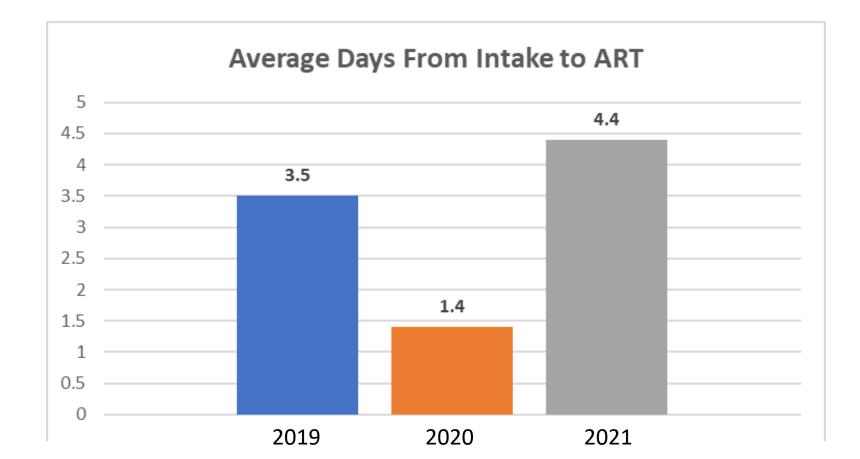
### **Days From HIV Diagnosis To Intake**





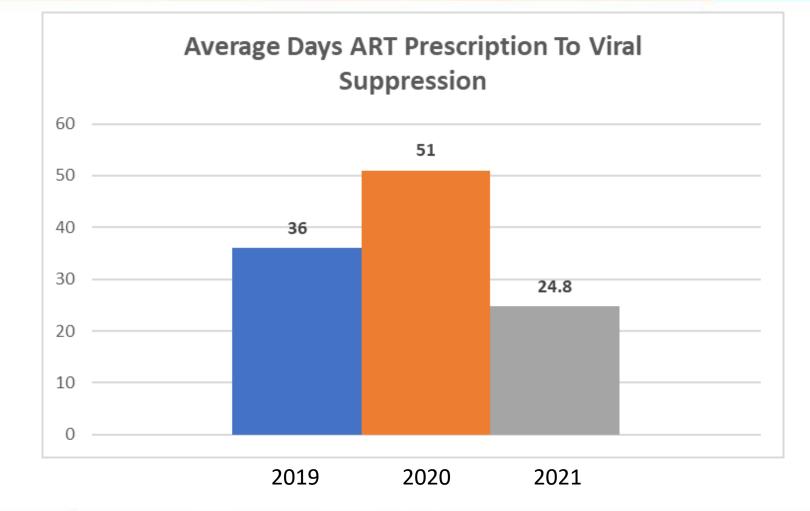
### **Average Days From Intake To ART**





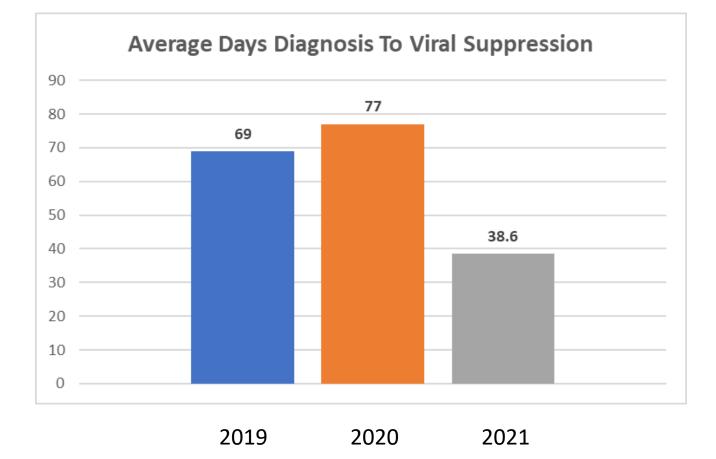
### Days From ART Prescription To Viral Suppression





## Days From Diagnosis To Viral Suppression





## Lessons Learned



### Clark County Social Service, Office of HIV

- Define desired outcomes
   = Performance Measures
- Provide continuous technical assistance & support
- Budget for monthly data team meetings with consultants

### Arizona Department of Health Services

- Strong collaborative approach with community partners
- Systemic approach and focusing on processes between partners in the system.

### TriYoung Inc.

- Integrated Systems
- Ease of Use
- Focus on End User Engagement
- Continuous Change

## **Contact Information**



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## Thank you!