

The logo features a large, stylized red graphic element on the left side, resembling a thick, L-shaped bar. The year '2018' is written vertically in light blue text within the vertical part of this graphic. To the right of the graphic, the word 'NATIONAL' is written in light blue, uppercase letters. Below 'NATIONAL', the name 'RYAN WHITE' is written in large, bold, white, uppercase letters. Underneath 'RYAN WHITE', the text 'CONFERENCE ON HIV CARE & TREATMENT' is written in light blue, uppercase letters. The entire logo is set against a dark blue background with a vertical red bar on the far left and a horizontal red bar at the bottom.

2018 NATIONAL
RYAN WHITE
CONFERENCE ON HIV CARE & TREATMENT

Maps, Graphs and Numbers, Oh My!

Jeff Vollman and Grey Clevenger

District HIV Program Director

Epidemiologist

Out of Care Project

- State HIV Surveillance Group suggested half of our infected population was out of care ≈ 300

Respectfully disagreed based on belief that...

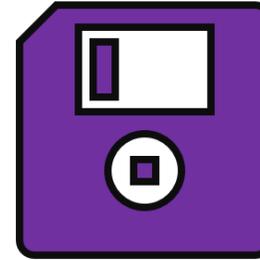
- High estimate of total infected
- Unlikely that percentage is accurate

Out of Care Project



• State Line List

- HIV infected living within District 1-2
- PHI included:
 - Patient identifiers
 - Demographics
 - Address, DOB, date diagnosed
 - CD4, Viral Loads, Providers
- No ability to clean data
- Labs could be delayed on entry into eHARS



• Local EMRs

- M&M / eClinicals / Careware
- Updated and accurate patient info
- Aware of enrollment history for past and present patients
- Ability to clean data as needed



STATE LINE LIST (678)



LIVING BRIDGE PATIENTS (145)



STATE LINE LIST II (533)



PATIENTS WITH LABS IN 2017 (309)



STATE LINE LIST III (224)



DECEASED (11)



STATE LINE LIST IV (213)



OUT OF
DISTRICT (38)



OUT OF
STATE (80)



OUT OF
CARE (95)

What do we do with this information?

-We Share It!

- **Deceased**, **Out of State** and **Out of District** are shared with HIV Surveillance

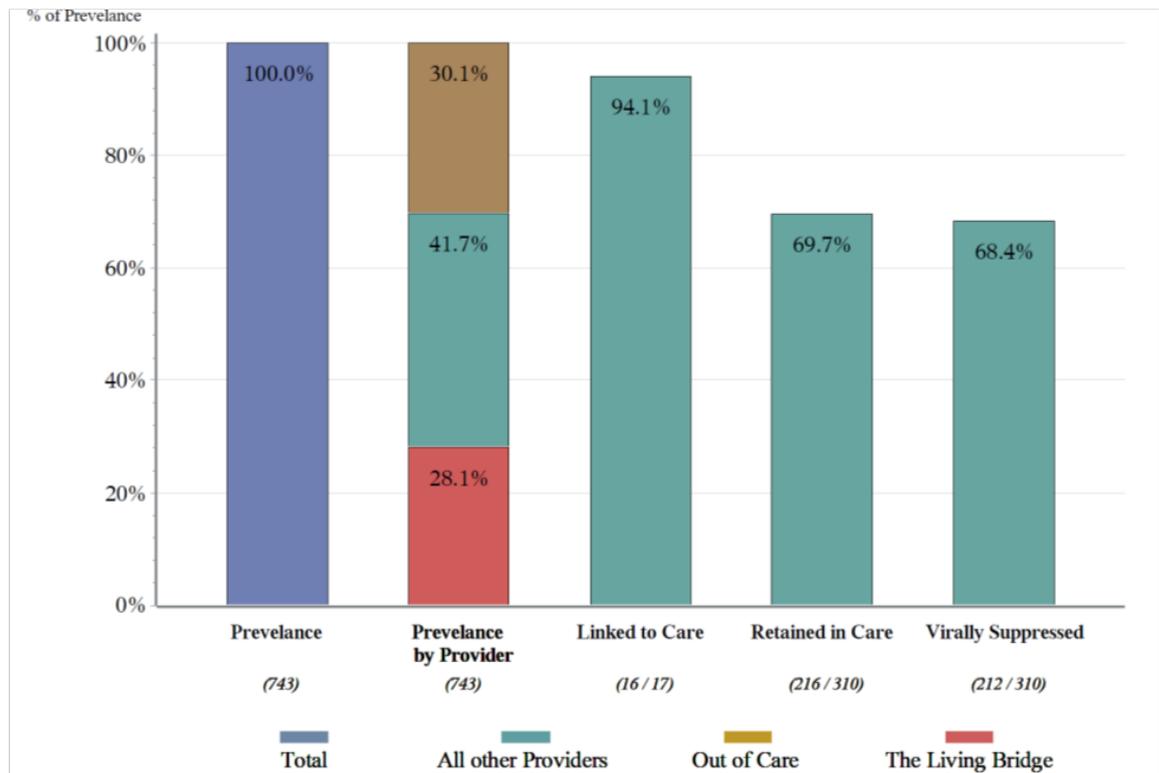
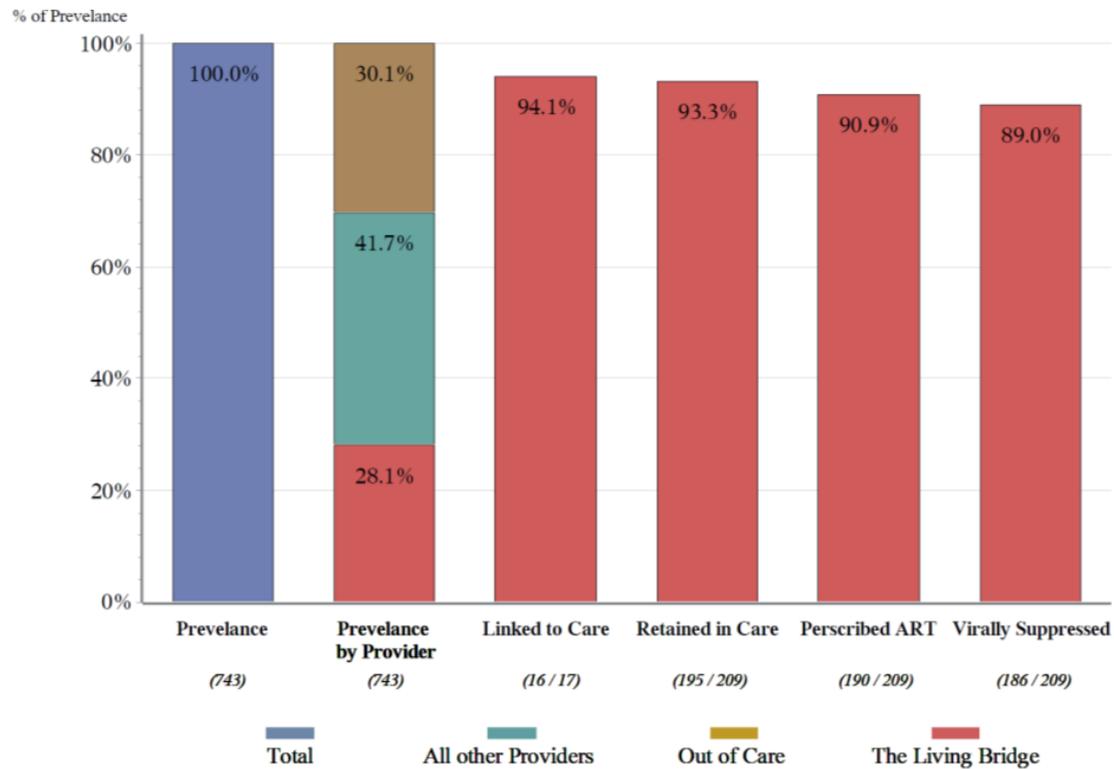
-We Use It!

- Re-Integration into Care (RIC)
 - Find those who are out of care
 - Assess care status
 - Offer services

Care Cascade Project

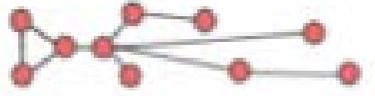
- ❖ Began with same datasets as Out of Care project and joined them
- ❖ Established total unduplicated patient population
- ❖ Defined levels of the care cascade
 - Linked – Newly infected that could have been enrolled in care <90 Days
 - Retained – Multiple medical visits for HIV within 6 months
 - HART – Taking HIV medication (Only TLBC)
 - Virally Suppressed – Viral load <200 c/ml
- ❖ Split patients by provider

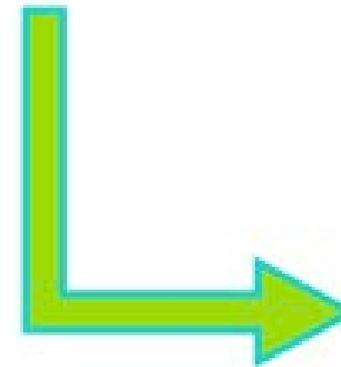
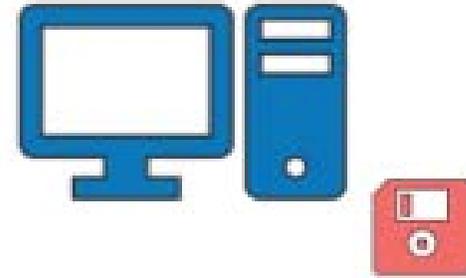
Cascade Comparison



Identifying those at High Risk

- Attempting to identify those at the highest risk of contracting or spreading HIV
- State Electronic Notifiable Disease Surveillance System (SENDSS)
 - Houses all reported morbidities for Chlamydia, Gonorrhea and Syphilis
 - HIV morbidity collected and stored separately
 - Morbidity summed across patient, disease and county
 - Morbidity of same disease must be >30 days apart

SendSS 



The List



List of High Risk Individuals

PATIENT	COUNTY	CHLAMYDIA	GONORRHEA	SYPHILIS	HIV	TOTAL
Meredith Palmer	WHITFIELD	2	4	0	0	6
Arthur Fonzarelli	PICKENS	1	3	0	0	4
Samantha Jones	CHEROKEE	2	2	0	0	4
Barney Stinson	CHEROKEE	2	1	0	0	3
Blanch Devereaux	CHEROKEE	2	1	0	0	3
Callie Torres	CHEROKEE	2	1	0	0	3
Charlie Harper	CHEROKEE	1	2	0	0	3
Donald Draper	CHEROKEE	2	1	0	0	3
Edna Krabapple	WHITFIELD	3	0	0	0	3
Glenn Quagmire	MURRAY	1	2	0	0	3
Jesse Pinkman	WHITFIELD	3	0	0	0	3
Margaret Houlihan	MURRAY	2	1	0	0	3
Thomas Magnum	WHITFIELD	1	2	0	0	3
Tyrion Lanister	CHEROKEE	3	0	0	0	3
Winston Scmidt	CHEROKEE	0	1	1	1	3

Targeted Outreach

To Identify the areas suspected of harboring those at the highest risk:

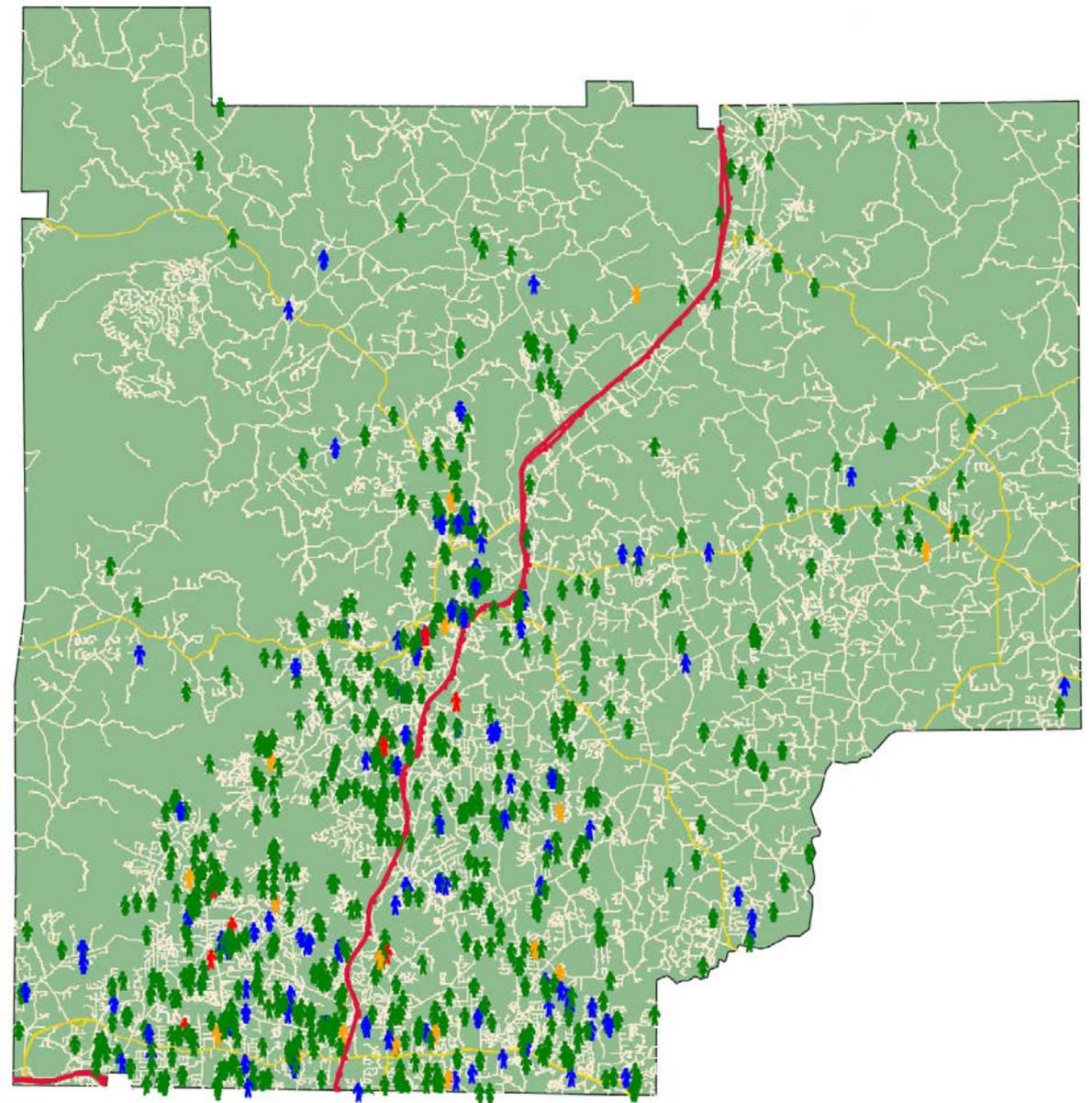
- 1) Combine datasets from SENDSS, HIV Surveillance with District Boundary and Georgia Roadways Map datasets.
- 2) Project the Maps into longitudinal and latitudinal coordinates
- 3) Separate the datasets out into groups of Points, Boundaries and Roads
- 4) Customize datasets to represent the best shapes, colors and sizes
- 5) Overlay all three in order of Boundaries, Roads then Points

Targeted Outreach Mapping

Using Symbols, Colors and Sizes to Control for:

- Disease
- Gender
- Race
- Ethnicity
- Age
- Risk factors

Targeted testing now is narrowed to the exact roads we want to focus our efforts towards.



Conclusion

Leveraging data from collaboration with State HIV Surveillance, county health departments and local medical records allows The Living Bridge Clinic to answer the questions that allow us to drive decision making.

- ❑ Who is out of care, where are they and can we reach them?
 - We know who, where and we will try

- ❑ Are we providing the best possible level of care?
 - 93% retained in care and a 89% viral suppression rate

- ❑ Who is at the highest risk for spreading and contracting HIV/STDs?
 - These 10 patients need education, counseling and PrEP

- ❑ Where should we focus our attention in the community?
 - Clusters buy age, race, ethnicity and gender