

The Whoosh: Innovative Data Exchange

National Ryan White Conference
August 2016

NYC Department of Health and Mental Hygiene
Transitional Health Care Coordination

Rationale / Challenges

One Stop Career Center Puerto Rico

Limited access to:

- ❑ Re-entry services
- ❑ Correctional health discharge planning
- ❑ Transportation assistance
- ❑ Coordinated care

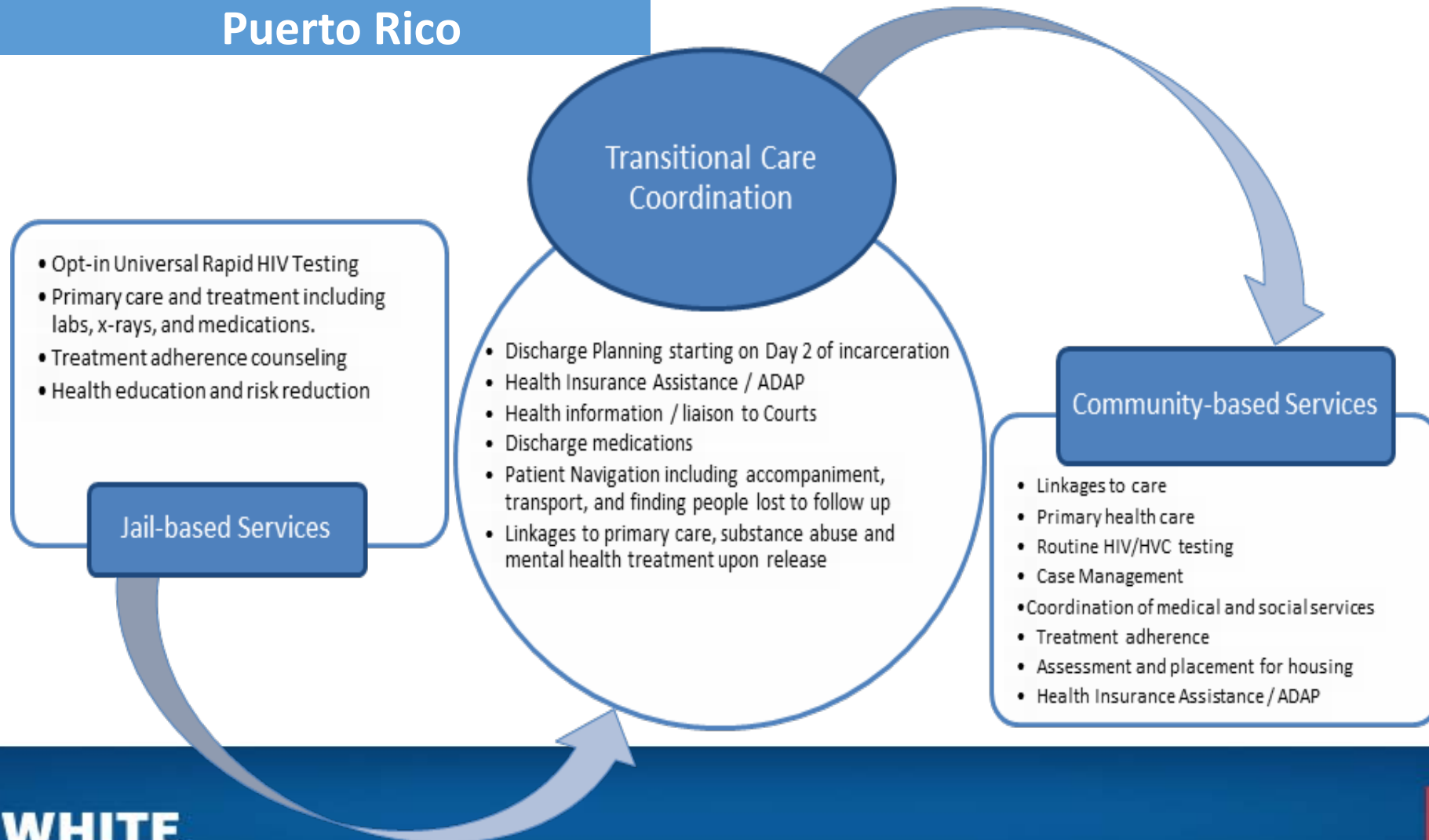
Damian Family Care Centers Bronx, NY

Inconsistent care:

- ❑ Short jail stays
- ❑ Multiple providers
- ❑ Part-time ID specialist
- ❑ Substance use

Practice Transformation Model

One Stop Career Center Puerto Rico



Practice Transformation Model

Damian Family Care Centers
Bronx, NY

- ✓ Adapt Hampden County's Public Health Model for Correctional Health*
- ✓ Train Nurse Practitioners as HIV specialists
- ✓ Incorporate Community Health Worker
- ✓ NP / CHW follow patients from Bronx jail at community clinics
- ✓ Share EHR and eCOMPAS TCMS
- ✓ Incorporate EPIC substance use program

*<http://www.mphaweb.org/PublicHealthModelforCorrectionalHealth.htm>

Steps toward Implementation

One Stop Career Center Puerto Rico

Identify staff:

- ✓ Train staff in HCCM
- ✓ State certified HIV counselors

Transportation:

- ✓ Transportation Service
- Identify sustainable funding

Coordinate with Corrections:

- ✓ Access to correctional facilities
 - Patient health records

Engage Key Stakeholders:

- ✓ Establish a Consortium
- ✓ Linkage Agreements
- ✓ Meet with Clients

Steps toward Implementation

Damian Family Care Centers
Bronx, NY

Identify / train staff:

- ✓ Identify NP and CHW
- Train NP and CHW

Share health and care management records:

- ✓ Access jail EHR at DFCC clinics
- ✓ Create Transitional Care Management System
- Add TCMS portal for DFCC

Patient Rosters:

- Provide discharge plans
- Coordinate with Damian EPIC program

Key Stakehold Collaborations:

- ✓ Damian to join *THCConsortium*
- DOC logistics for EPIC program

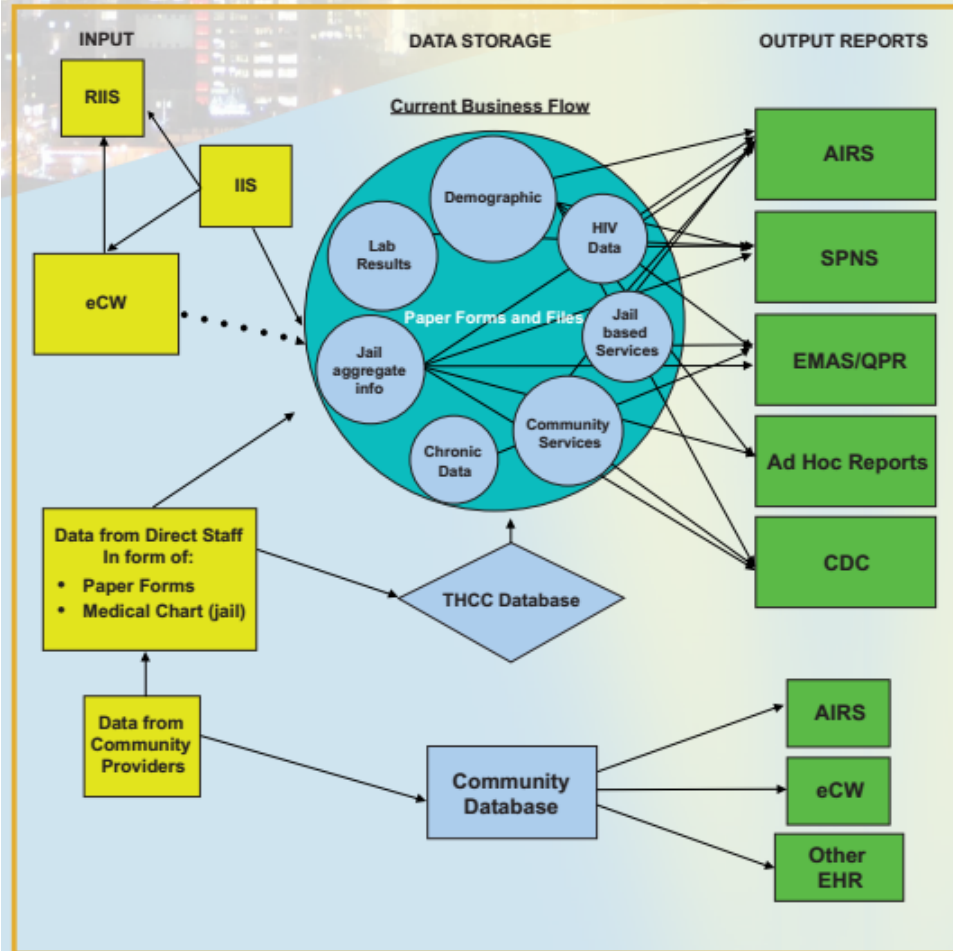
One Stop Career Center Puerto Rico

- Execute transportation contract
- Access to jail health records
- IRB approval (submitted 6-3-15)

Damian Family Care Centers Bronx, NY

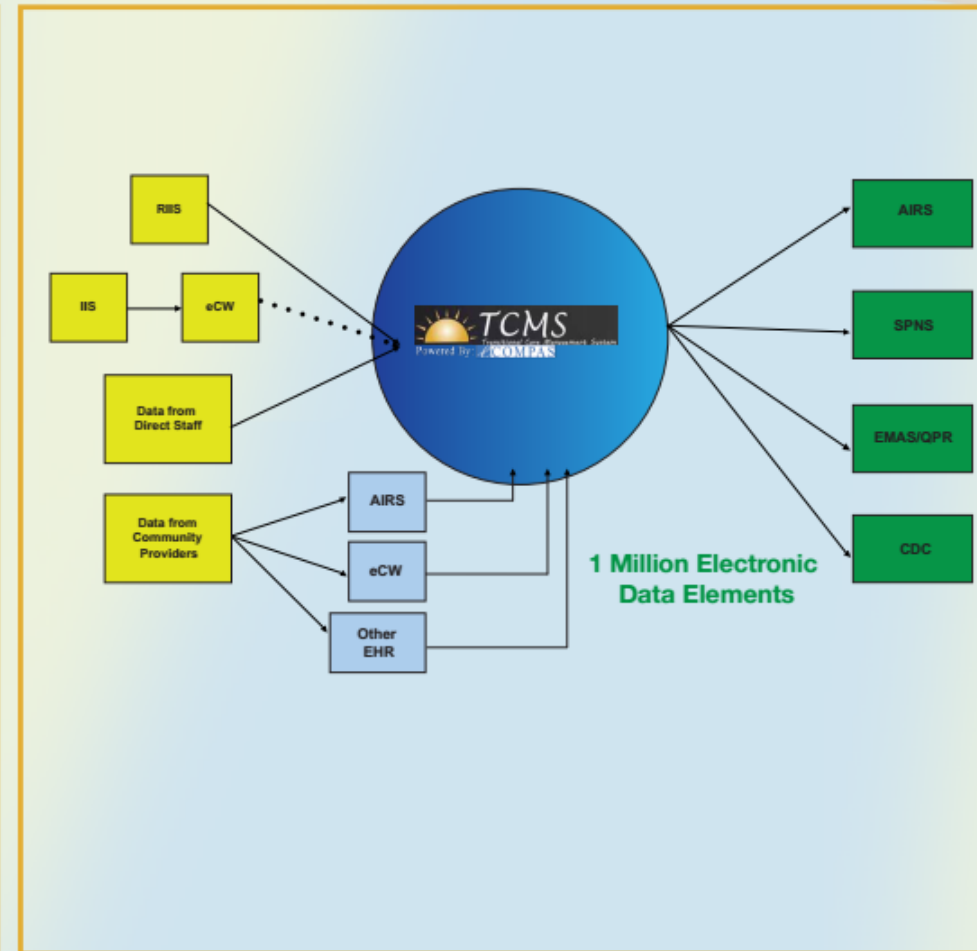
- Staff training
- Site visit to Hampden County jails
- Access to TCMS
- IRB approval

Before



- ✗ Time spent on entering data into multiple excel sheets hence less effective and lower efficiency
- ✗ Time spent on cleaning up errors in multiple excel sheets
- ✗ Double data entry
- ✗ Communication back and forth on data clean up
- ✗ No ability to monitor real time activities

After



- ✓ No more paper/excel sheets thus improved effectiveness and efficiency
- ✓ Work smarter and not harder
- ✓ Projected to redirect 10-15% from admin to direct service delivery
- ✓ One Stop to access all information
- ✓ No more double data entry, direct data integration from EMR
- ✓ Instant access to management reports
- ✓ Accountability of community partners

The Whoosh! ... ecW to eCOMPAS data flow

8/9. SS #	<input type="text"/>	6. Gender	M
1. NYSID	09418699J	2. Booking Case	2411410438
6a. Race	Black	6b. Ethnicity	Non-Hispanic

PDATE - Client Identifiers

9a. Date of Birth	<input type="text"/>	9b. A.K.A	<input type="text"/>
9c. SS #	<input type="text"/>	9d. Gender	<input type="text"/>

Criminal Justice History

10. Last Jail Admission	07/24/2014	11. Next Court Date	01/01/1901
10a. Last Medical Intake Date	<input type="text"/>	11a. Last Known Facility	19
12. Community Release Date	03/06/2015	12a. Last Discharge Date	03/06/2015
13. Projected Discharge Date	03/21/2015		

Presenting Issues

13a. For what reason was patient not seen	Other	13b. What service(s) were missed	Assistance with h
14. Health Liaison to Court	-- Please Select --	15. Accompaniment	-- Please Select --
16. Lost to	-- Please Select --	17. Transitional	<input type="checkbox"/> HIV

🔍 Court Advocacy

83. Eligibility determination ⚡ Other ⓘ

83a. Eligibility determination -- Other (please describe) ⚡ Yes ⓘ

84. Date of Next Court Appearance ⚡ Yesterday ⓘ

85. Completed Appointment Preparation? ⚡ No ⓘ

86. Appointment Date ⚡ Tomorrow ⓘ

🔍 Referrals to Care Management

87. Health Home Enrolled? ⚡ Maybe ⓘ

87a. If enrolled, record Health Home provider ⚡ Umbrella Corporation, Division 1 ⓘ

87b. For which programs is this client eligible? ⚡ Other ⓘ

87c. For which programs is this client eligible? -- Other Health Home Organization (specify in notes) ⚡ Something ⓘ

88. To which care management organization is the patient referred? ⚡ Umbrella Corporation, Division 2 ⓘ

88a. Date referred to Care Management Partner ⚡ Day After Tomorrow ⓘ

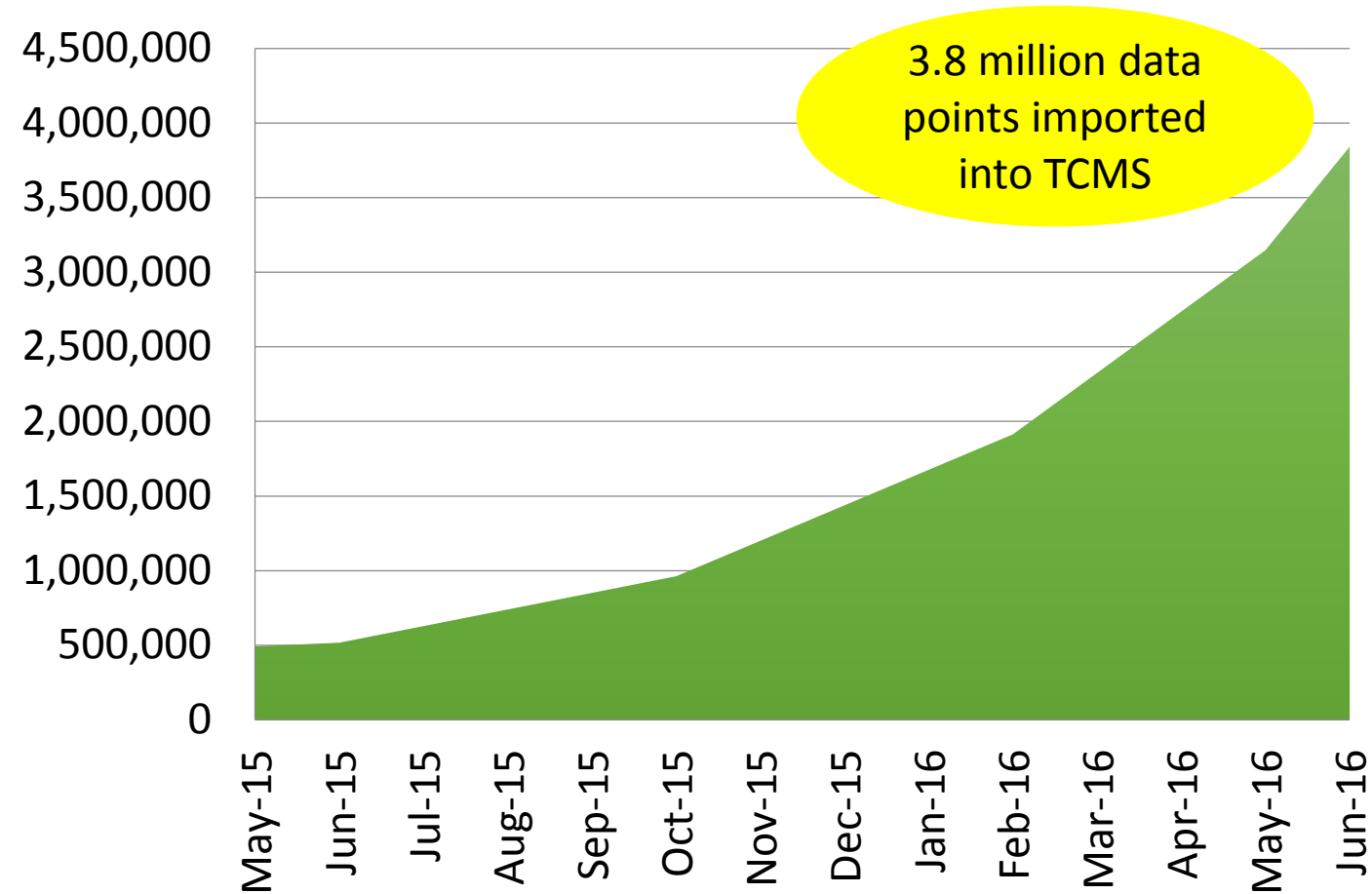
88b. Partner referral status? ⚡ Jury's Still Out ⓘ

🔍 Referral to RITC Partner

89. To which organization was the patient referred? ⚡ Umbrella Corporation, Divis ⓘ


90. Date referred to RITC Partner ⚡ Two Days After the Morning ⓘ

TCMS Data Feeds (the Whoosh!)



10-15% savings in admin costs

TCMS Program Summary Report



Home Main Reports Help Nolan Ching 14:07

THCC Program Summary Report

1. Start Date: 08/10/2015 2. End Date: 02/08/2016 or Select: Past 6 Months

* 3. Program: HIV Care, Chronic Care

* 3b. RITC Partner: Exponents, Fortune Society, WPA

* 3a. Organization Assigned: 3 selected

* 3c. Care Management / Health Home: ASCNYC, Bronx Health Homes

[View Report](#)

(Expand All) • (Collapse All) [Print](#) [Export to Excel](#)

4. Known HIV+ Admitted To Jail	136
5. THCC Attempted Contact During Month	52
6. + Received a Plan from THCC	532
28. + Total Released To Community	758
37. + Total Confirmation of Primary Care	249
46. + Overall Connection Rate	0.33

Feedback

Collapse-expand feature

The screenshot displays the TCMs (Transitional Care Management System) interface for a THCC Program Summary Report. The header includes the TCMs logo, navigation links (Main, Reports, Help), the user name Nolan Ching, and the time 19:07. The report title is "THCC Program Summary Report".

Filters are set for Start Date: 08/10/2015, End Date: 02/06/2016, and a dropdown menu set to "Past 6 Months". Other filters include Program: HIV Care, Chronic Care; RITC Partner: Exponents, Fortune Society, WPA; Organization Assigned: 3 selected; and Care Management / Health Home: ASCNYC, Bronx Health Homes.

A "View Report" button is visible. Below the filters, there are options to "Expand All" or "Collapse All", and buttons for "Print" and "Export to Excel".

Item	Count
4. Known HIV+ Admitted To Jail	136
5. THCC Attempted Contact During Month	52
6. → Received a Plan from THCC	532
7. → Did Not Receive a Plan	212
8. Released within 48 Hours	58
9. Declined	16
10. Pending Intake (Admitted Less than 48 Hours)	92
11. Other	46
12. → Community Partner Referrals	164
13. → RITC Partner Referrals	69
14. Exponents Referral	13
15. Fortune Society Discharge Planning	39
16. WPA Referral	17
17. → Care Management / Health Home Referrals	95

17.	— Care Management / Health Home Referrals	95
18.	ASCNYC Referral	24
19.	Bronx Health Home Referral	71
20.	— Community Partner Enrolled	156
21.	— RITC Partner Enrolled	60
22.	Exponents Enrolled	34
23.	Fortune Society Discharge Planning Enrolled	22
24.	WPA Enrolled	4
25.	— Care Management / Health Home Enrolled	96
26.	ASCNYC Enrolled	49
27.	Bronx Health Home Enrolled	47
28.	— Total Released To Community	758
29.	THCC Released To Community	250
30.	— RITC Partner Released To Community	183
31.	Exponents Released	25
32.	Fortune Released	92
33.	WPA Released	66
34.	— Care Management / Health Home Released to Community	323
35.	ASCNYC Released	147
36.	Bronx Health Home Released	176
37.	— Total Confirmation of Primary Care	249
38.	THCC Confirmation of Primary Care	54
39.	— RITC Partner Confirmation of Primary Care	110

Feedback



35.	ASCNYC Released	147
36.	Bronx Health Home Released	176
37.	— Total Confirmation of Primary Care	249
38.	THCC Confirmation of Primary Care	54
39.	— RITC Partner Confirmation of Primary Care	110
40.	Exponents Confirmation of Primary Care	26
41.	Fortune Confirmation of Primary Care	50
42.	WPA Confirmation of Primary Care	34
43.	— Care Management / Health Home Confirmation of Primary Care	85
44.	ASCNYC Confirmation of Primary Care	42
45.	Bronx Health Home Confirmation of Primary Care	43
46.	— Overall Connection Rate	0.33
47.	THCC Connection Rate	0.22
48.	— RITC Partner Connection Rate	0.89
49.	Exponents Connection Rate	0.98
50.	Fortune Connection Rate	0.54
51.	WPA Connection Rate	0.52
52.	— Care Management / Health Home Connection Rate	0.26
53.	ASCNYC Connection Rate	0.27
54.	Bronx Health Home Connection Rate	0.24

Feedback

Client Drill downs

46.	Overall Connection Rate	0.33
47.	THCC Connection Rate	0.22
48.	RITC Partner Connection Rate	0.89
49.	Exponents Connection Rate	0.98
50.	Fortune Connection Rate	0.54
51.	WPA Connection Rate	0.52
52.	Care Management / Health Home Connection Rate	0.26
53.	ASCNYC Connection Rate	0.27
54.	Bronx Health Home Connection Rate	0.24
Client Drilldown for #6		
		View
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		View
		View

Feedback

TCMS Future vision

- Real time TCMS access to community partners
- Summary reports and ad hoc reports to guide partners for practice transformation
- Client Data Sharing between community partners
- Multi lingual capabilities
- Expanding the whoosh to send data from eCOMPAS to other data systems.

Q & A

Wrap Up

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