

DC | **HEALTH**
GOVERNMENT OF THE DISTRICT OF COLUMBIA

RW GY32 Part B Sub-Recipient Kickoff Meeting
April 6, 2022

Data to Action
Patricia Ward, Data to Care Investigator &
Brittany Wilbourn, Epidemiologist
Strategic Information Division

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DC Health

- The District of Columbia Department of Health promotes health, wellness and equity across the District, and protects the safety of residents, visitors and those doing business in our nation's Capital.

HAHSTA

- Optimizing health, wellness and lifelong success through innovation for people living with or at risk of HIV, hepatitis, STDs, and TB

SID

- Collect, monitor, evaluate, disseminate and act to promote and protect public health

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Overview

- Data to Care Updates
- Cluster Detection and Response Updates
- What to Expect

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Data to Care

Kate Drezner
Kate.Drezner@dc.gov

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Goals of Data to Care

- **Identify** people living with HIV who are out of care (OOC)
- **Link** or **reengage** persons in HIV medical care
- **Support** the HIV Care Continuum
- **Improve** health outcomes for people living with HIV
- **Reduce** HIV-related health disparities and health inequities

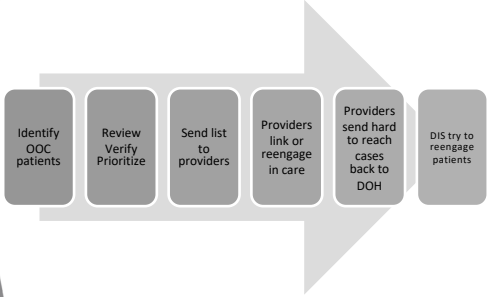
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Data to Care Process



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graph LR; A[Identify OOC patients] --> B[Review Verify Prioritize]; B --> C[Send list to providers]; C --> D[Providers link or reengage in care]; D --> E[Providers send hard to reach cases back to DOH]; E --> F[DIS try to reengage patients];
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Identify Out of Care Patients

HIV + and
in eHARS

≥ 13
years

DC
resident

Lab in
last 2 yrs

OOC
definition

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Identify Out of Care Patients

No viral load or CD4
count for ≥ 12 months

Not virally suppressed at
last lab 9-12 months ago

Newly diagnosed and
never in care

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Review, Verify, and Prioritize

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Exchange with Providers

- Assignment of out of care cases based on most recent lab
- Data to Care coordinator will send list via Sharefile or will call organization depending on patient volume
- We tailor data sharing/timelines to each provider
- Providers can also send DOH lists of potential out of care patients they believe are out of care and cannot reach
 - eHARS / DC PHIS / CRISP check
 - Assignment to DIS when appropriate

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DIS Try to Reengage Patients

Risk Education	• Educate on signs and symptoms of STIs
Risk Reduction	• Encourage adoption of behaviors that will reduce their risk of transmitting a STI.
Navigation and Treatment Adherence	• Prevent the patient from infecting others.
Linkage to care	• Ensure that all PLWH who are investigated are linked to medical care
Assuring Partners Testing	• Notify partners and get them tested

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Lessons Learned

- **Intensity of Effort**
 - Substantial personnel time required for D2C effort
 - Process can be burdensome on providers
- **Case support needs**
 - PLWH requiring reengagement may have multiple social, economic, and/or behavioral barriers to treatment compliance
- **Utility/Effectiveness**
 - Better data sharing, accurate provider reporting, timely provider-DOH exchanges could help improve efficiency

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Current Priorities

- Improved data integration and management
 - Careware
 - Medicaid ARV data
 - DC PHIS
 - CRISP
 - Redcap
- Development of routine exchanges with high volume providers
- Improved communication and relationships between the DOH and community providers
- Performance monitoring & feedback

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Cluster Detection and Response

Brittany Wilbourn
Brittany.Wilbourn@dc.gov

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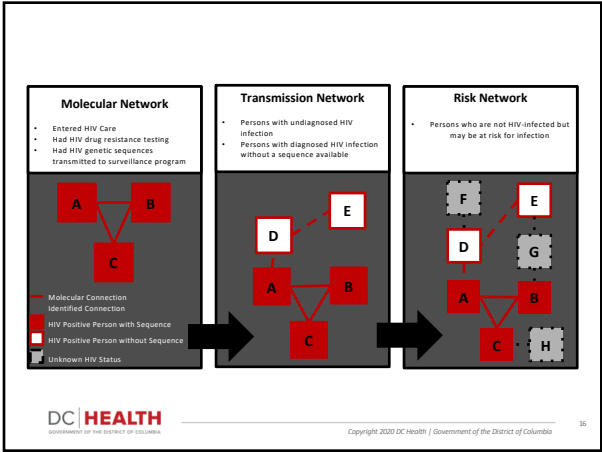
What is Cluster Detection and Response

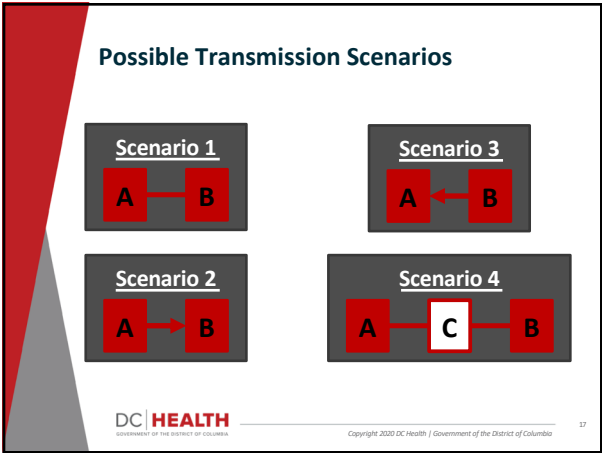
- Cluster Detection and Response is the collection, reporting, and analysis of HIV genetic sequences generated through HIV drug resistance testing for the purposes of interrupting disease transmission and improving health outcomes.
 - Identifying transmission networks
 - Targeted Partner Services
 - Targeted Re-engagement

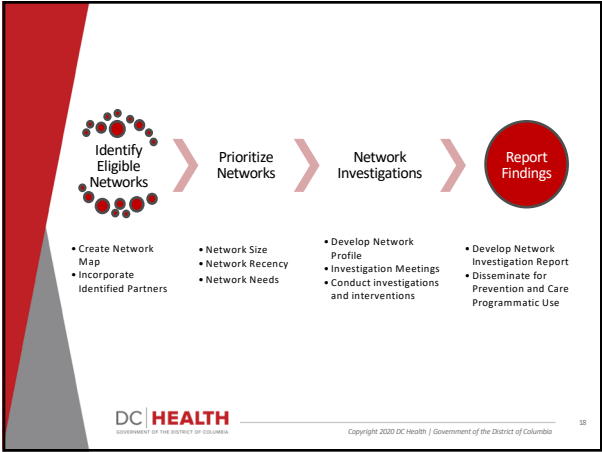
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Reengagement/ Prevention Activities

Risk Education	• Educate on signs and symptoms of STIs
Risk Reduction	• Encourage adoption of behaviors that will reduce their risk of transmitting a STI.
Navigation and Treatment Adherence	• Prevent the patient from infecting others.
Linkage to care	• Ensure that all PLWH who are investigated are linked to medical care
Assuring Partners Testing	• Notify partners and get them tested

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Data Privacy Protection Amendment Act of 2021

- **Limiting** who may authorize the release of information obtained, collected, or produced by the Department of Health during the course of routine public health surveillance.
- **Prevent** such identifying information from being obtained through discovery, or admitted as evidence, in a criminal or civil case in the District of Columbia courts.
- **Help** address concerns by updating the law to protect this sensitive health information and reinforce that the Department's HIV surveillance activities are focused on improving population health.

<https://lims.dccouncil.us/Legislation/B24-0207>

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Recent Accomplishments

- Finalizing HIV Cluster Outbreak Detection and Response Plan
- Updated cluster investigation documentation process
- Developed internal cluster detection and response reports
- Data protections legislation
 - Legislation heard by Health Committee in November 2021

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What to Expect

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Provider Engagement

- Provider participation is needed to make these programs successful
- Email requests to participate in Data to Care
- Phone calls from DC Health requesting information on patients

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QUESTIONS?

Speaker Contact Information:
Kate Drezner- Kate.Drezner@dc.gov
Brittany Wilbourn- Brittany.Wilbourn@dc.gov

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