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

DC Health

- The District of ColumbiDepartment 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

Overview

- Data to Care Updates

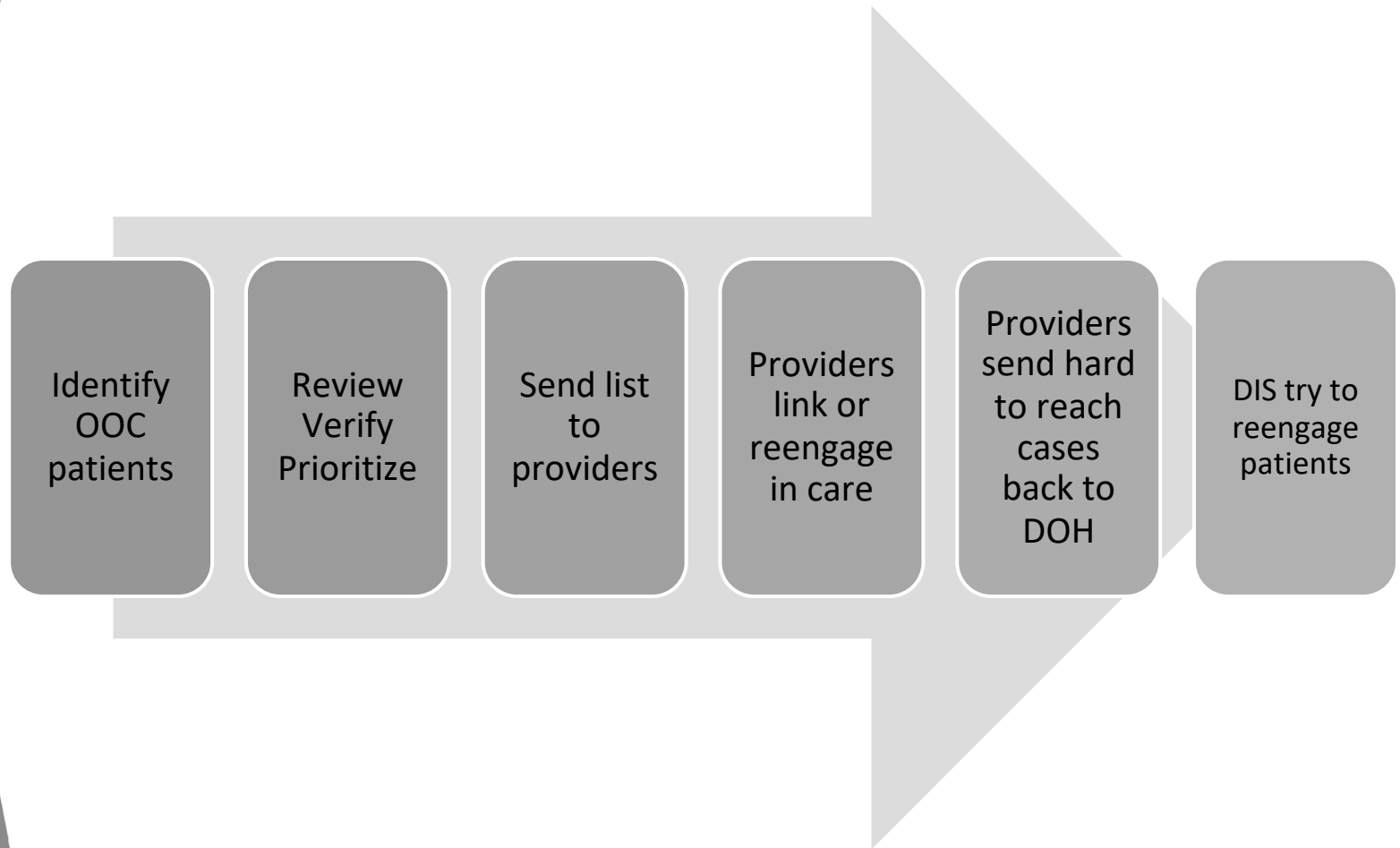- Cluster Detection and Response Updates

- What to Expect

Data to Care

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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

Identify OOC patients → Review Verify Prioritize → Send list to providers → Providers link or reengage in care → Providers send hard to reach cases back to DOH → 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

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
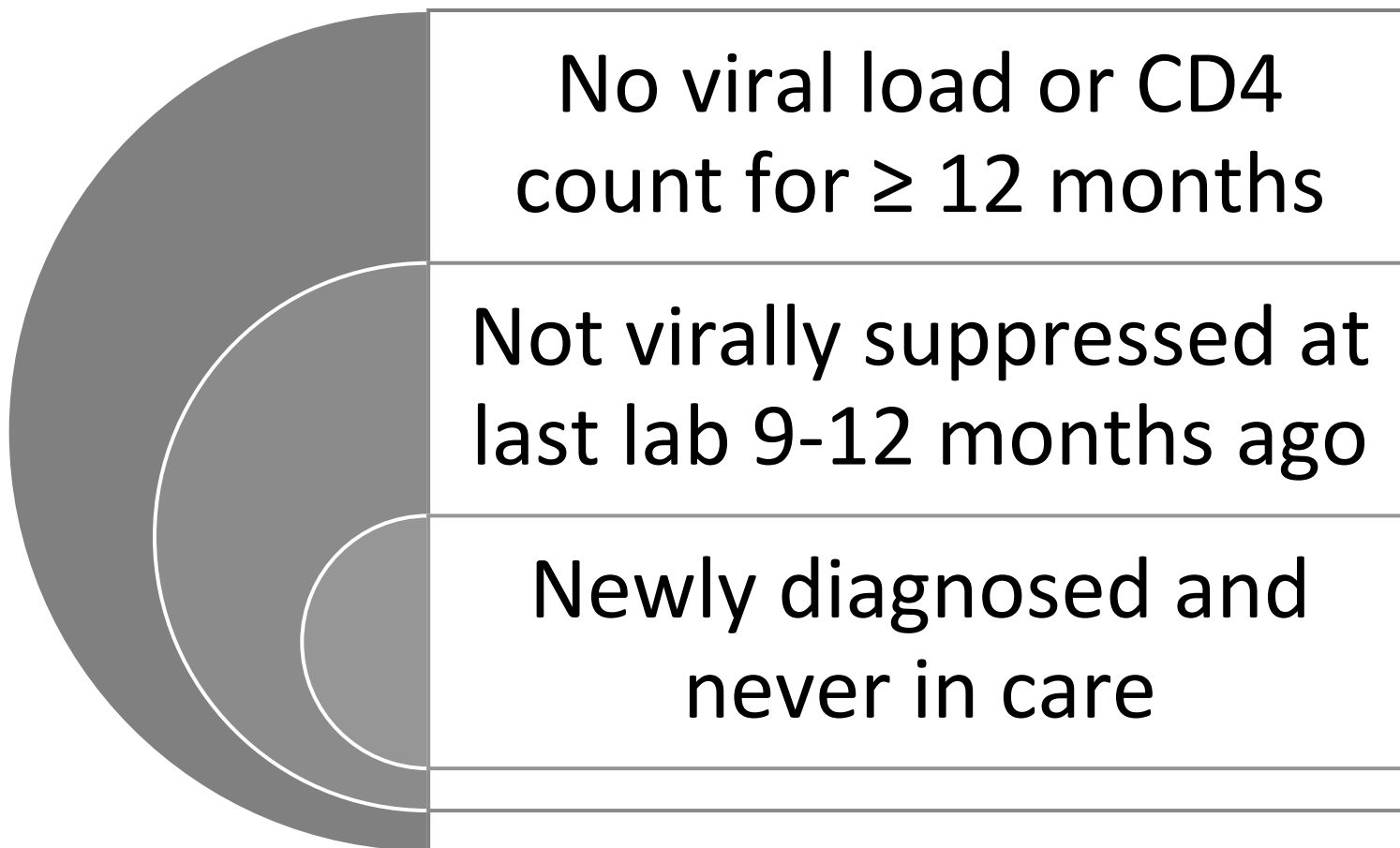
Review, Verify, and Prioritize

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

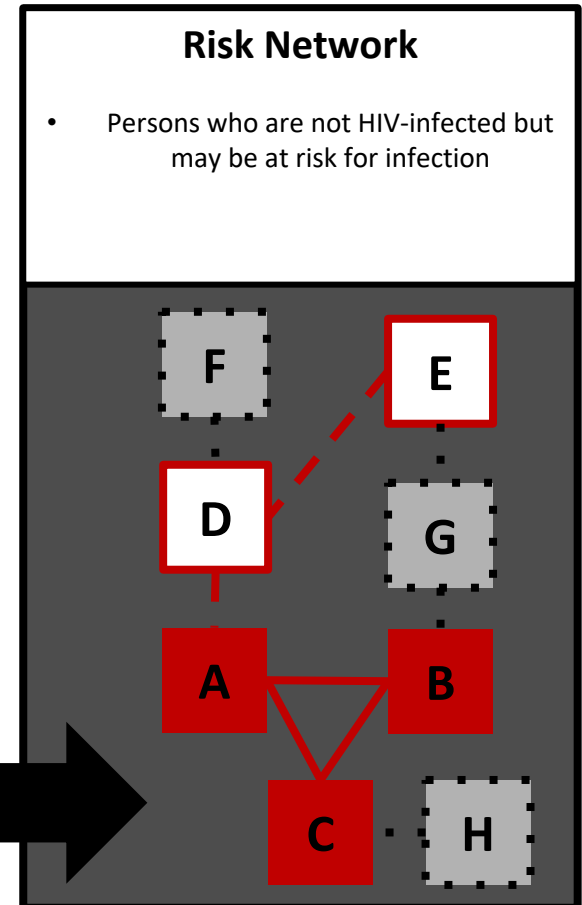- Performance monitoring & feedback
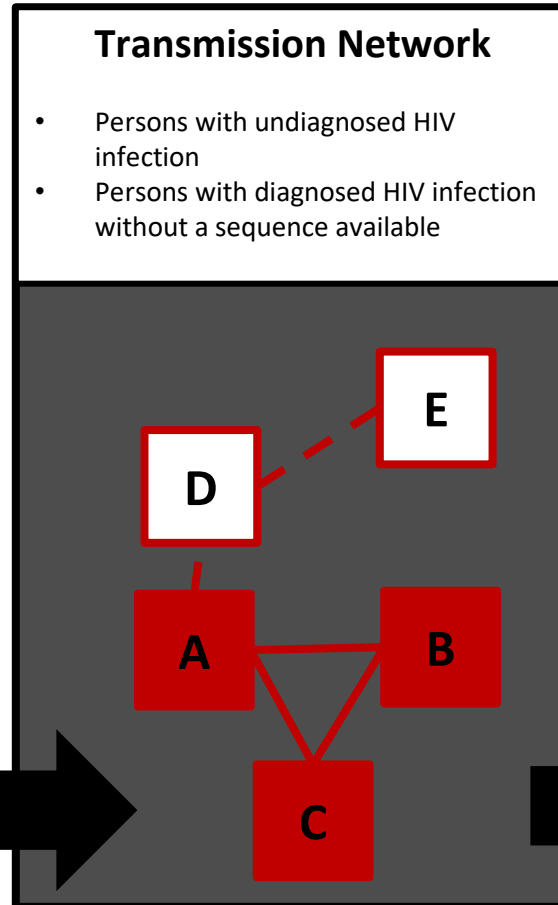
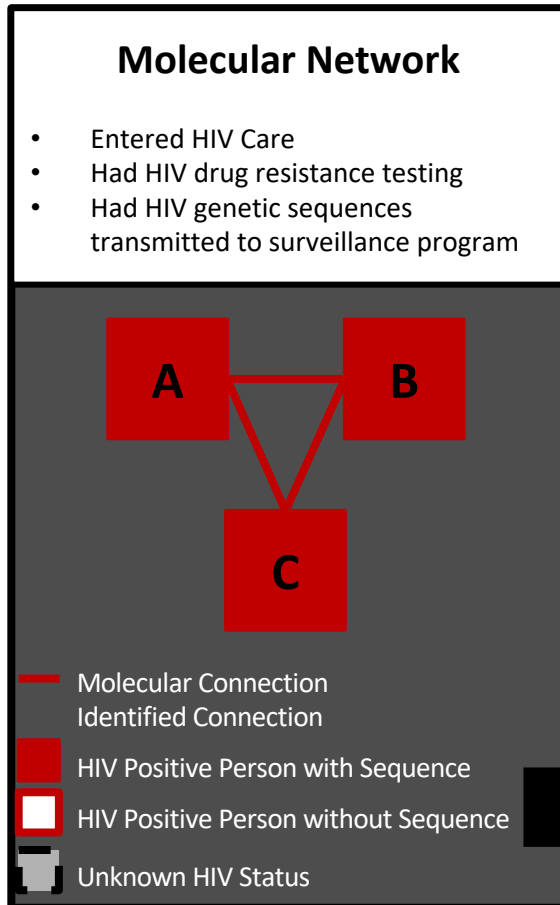# Cluster Detection and Response

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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
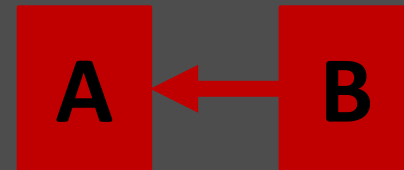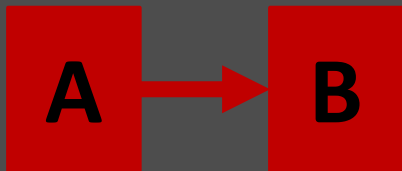
    - Targeted Re-engagement

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Molecular Network

- Entered HIV Care
- Had HIV drug resistance testing
- Had HIV genetic sequences transmitted to surveillance program

Transmission Network

- Persons with undiagnosed HIV infection
- Persons with diagnosed HIV infection without a sequence available

Risk Network

- Persons who are not HIV-infected but may be at risk for infection

Molecular Connection
Identified Connection

HIV Positive Person with Sequence

HIV Positive Person without Sequence

Unknown HIV Status

Possible Transmission Scenarios

Scenario 1

A — B

Scenario 2

A → B

Scenario 3

A ← B

Scenario 4

A — C — B

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Identify Eligible Networks
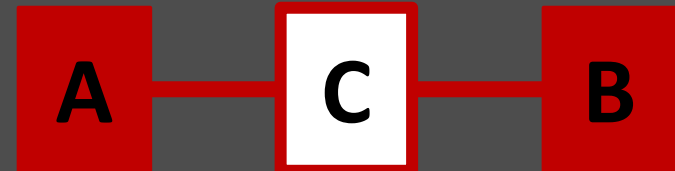
- Create Network Map
- Incorporate Identified Partners

Prioritize Networks

- Network Size
- Network Recency
- Network Needs

Network Investigations

- Develop Network Profile
- Investigation Meetings
- Conduct investigations and interventions

Report Findings

- Develop Network Investigation Report
- Disseminate for Prevention and Care Programmatic Use

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 Reponse Plan

- Updated cluster investigation documentation process

- Developed internal cluster detection and response reports

- Data protections legislation

  – Legislation heard by Health Committee in November 2021

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?

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For more information on the District's COVID-19 response, visit **coronavirus.dc.gov**