

New Era, New Act: Improving Ways to Deliver HIV Testing Services

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Topics Covered:

- Overview of HHC
- HIV Testing Expansion Planning
- Achievements
- Lessons Learned
- Tools



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NYC Health and Hospitals Corporation is...

- **Public benefit corporation created in 1969**
- **Largest municipal healthcare system in US**
 - 5,000 medical staff and 38,000 employees
 - 7 regional healthcare networks
 - 11 acute care hospitals (Designated AIDS Centers)
 - 6 diagnostic and treatment centers (D&TCs)
 - 4 long-term care hospitals
 - 95 extension clinics
- **MetroPlus (Health Maintenance Organization)**
 - Partnership in Care (HIV Special Needs Plan)
- **Health and Home Care Agency**



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Who We Are, *continued*

- 1.3 million New Yorkers served annually
- 224,300 discharges
- 19,000 HIV positive patients receiving HIV primary care
- 4,963,600 visits
- \$5.5B operating budget

Note: FY07 Data



How Did HHC Get Here?

- FDA approval of rapid tests
- Treatment advances and early HIV diagnosis can prolong and improve the quality of life
- Need to increase the percentage of patients who received their results



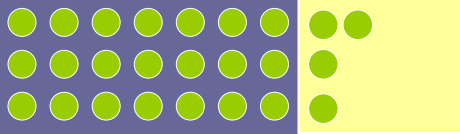
still

New York City has more AIDS cases than Los Angeles, San Francisco and Miami combined



HHC is interested in the estimated 25,000 New Yorkers with HIV who do not know their status

Of those, 4,000 may access services at HHC facilities

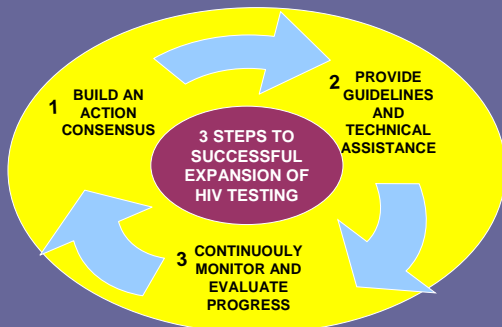


 = 1,000 HIV Positive New Yorkers who do not know their status

What Process Led to the HHC HIV Testing Expansion Initiative?

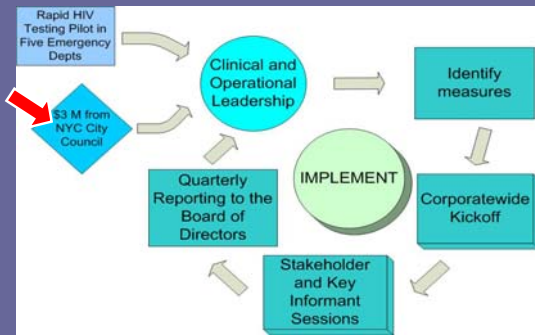
- Building an **HHC Action Consensus**
- Establishing a corporate requirement that each facility:
 - Have a **Plan** in place to expand HIV testing
 - **Expand** to 3 venues - IP, OP, ED
 - **Monitor** facility progress against targets
 - Use of a rapid HIV test was not mandated

The HHC Model



BUILDING AN ACTION CONSENSUS

HIV Testing Expansion Plan



HIV Testing Expansion Initiative Goals

- Increase the number of unique patients who know their HIV status
 - > Provide tests to 100,000 unique patients for HIV in FY06
 - > Provide tests to 150,000 unique patients for HIV in FY07
 - > Provide tests to 150,000 unique patients for HIV in FY08
- Increase the proportion of patients who enter care early
 - > Reduce the number of concurrent AIDS diagnoses
- Once in care, retain patients in care
 - > >80% of patients will have 2 medical visits in the last 12 months, with at least one visit in the last 6 months

Plan, Monitor and Adjust Processes

Planning

- Build consensus
- Create facility plan
- Identify staff and staffing patterns
- Conduct trainings
- Ensure sufficient supplies on hand
- Use FDA approved technology
- Monitor plan

Impressions

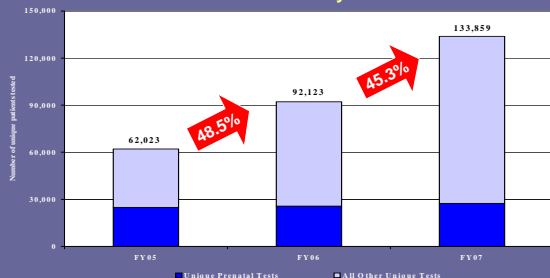
- Expansion follows many paths
- Clinician and staff **Champions** are drivers of success
- Technology facilitates rapid expansion
- Quick test
- Lab automation
- Continued consensus building is vital to expansion

Next Steps

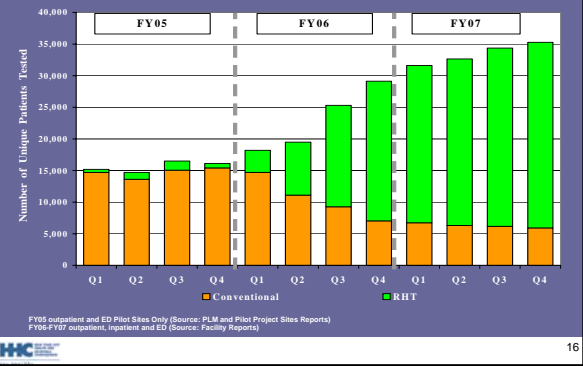
- Continually revisit processes and analyze data
- Share best practices
- Set aggressive yet achievable targets
- Incorporate use of standardized electronic testing documentation

Testing Summary

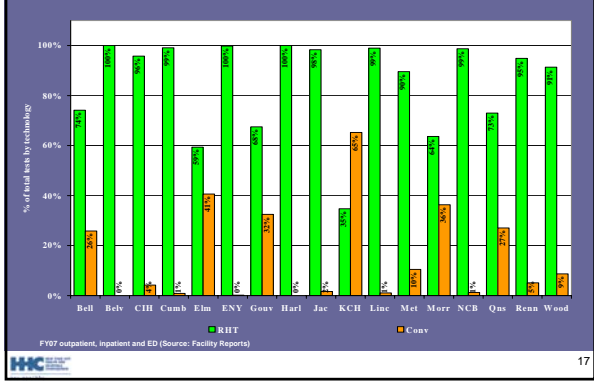
The Number of Unique Patients Tested Grew While Prenatal Testing and Overall Patient Volume Remained Relatively Stable



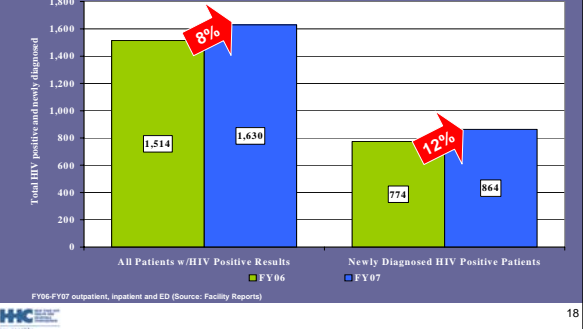
Rapid HIV Testing Comprised the Majority of Unique Tests Conducted in FY06 and FY07



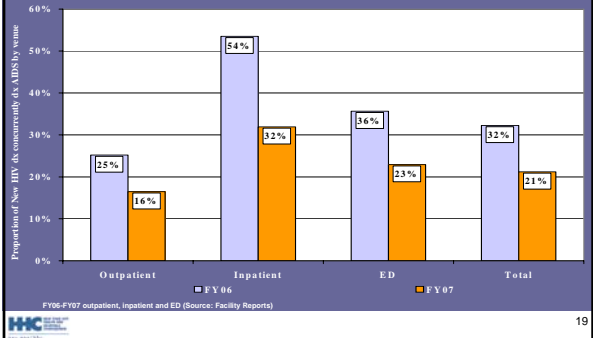
However, Its Use Varied Widely Across Facilities



In FY07, Both the Total Number of Unique Patients Who Tested HIV Positive and the Subgroup Newly Diagnosed With HIV Increased

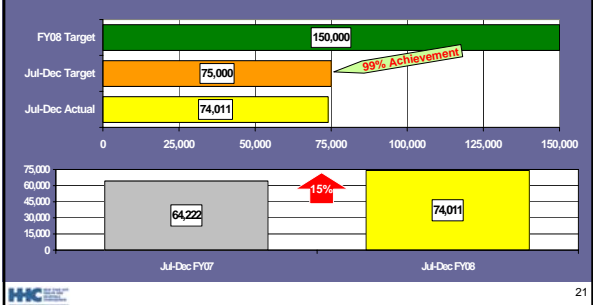


Of Newly Diagnosed Patients Who Kept Their First HIV Appointment, Fewer Were Concurrently Diagnosed with AIDS in FY07 vs FY06

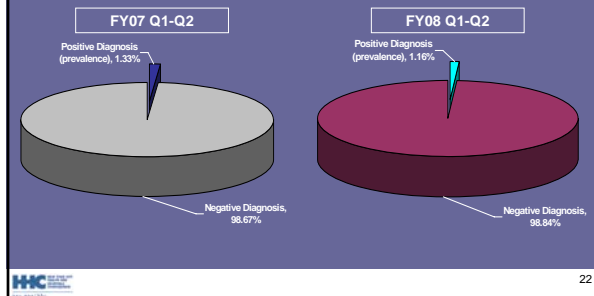


Fiscal Year 2008
Mid-Year Update

During the First 6 Months of FY08, HHC Achieved 99% of Target and Increased Number of Unique Patients Tested Compared to the Same Period Last Year



HIV Prevalence Remained Relatively Stable During the First 6 Months of FY08 Compared To The Same Period Last Year



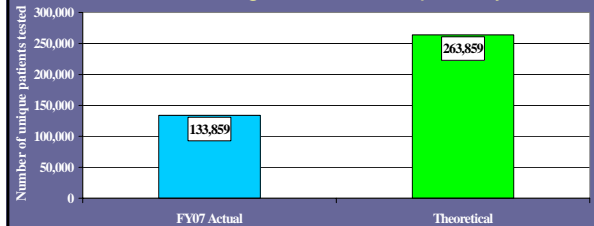
Identifying New Yorkers Living with HIV/AIDS

Of the 133,859 unique patients tested for HIV at HHC in FY07:

- Every 83 tests resulted in one HIV positive result
- Every 155 tests resulted in one “newly diagnosed” HIV positive result

WHAT IF?

An additional 500 clinicians began offering and conducting one HIV test per day?



HHC might experience:
 An increase of 97% in the number of unique patients testing (133,859 v. 263,859)
 An increase of 94% in the number of unique patients testing HIV positive (1,630 v. 3,163)
 An increase of 53% in the number of patients newly diagnosed with HIV (864 v. 1,318)

Take Away Messages

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Take Away Messages

1. The data must inform the direction of testing, policy implications and other services.
2. Best practices for successful expansion of HIV testing will look different at each facility – one size does not fit all.
3. Inpatient testing provides significant opportunities as well as challenges particularly in complex teaching facilities.
4. Facilities are encouraged to increase the number of clinicians offering and conducting routine HIV tests.
5. The presence of clinician champions and well functioning, interdisciplinary teams can significantly improve testing rates.

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Variables That Impact Testing Expansion

Drivers

- Widespread use of a rapid, easy-to-use HIV test
- Consistent use of the streamlined HIV counseling model with regular monitoring and evaluation
- Clinical and executive-level commitment to expand testing within the facilities

Inhibitors

- Number of clinicians offering and conducting testing at some facilities
- Interdisciplinary teams are not available 24/7
- Lack of dedicated space for counseling HIV-positive patients in all venues
- Staffing shortages
- Lack of a standing order for HIV testing at some facilities
- Decrease in funding

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Tools

- Facility Surveys
- Detailed Reporting Instructions for Facilities
- Detailed Reporting Templates for Facilities
 - Detailed Statistical Summary Report
 - Monthly Narrative Summary
 - Major Accomplishments and Program Highlights
 - Barriers to Service
 - Testing Volume
 - Staff Vacancies
 - Follow up on newly diagnosed HIV positive patients linked to care
 - Medical Record Numbers
 - For patients who test HIV positive
 - Invalid, indeterminate and or have discordant rapid test results



Acknowledgements

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These slides and the information contained within are not to be reprinted or used without permission of the authors. Please contact the Office of Corporate Planning and HIV Services at the New York City Health and Hospitals Corporation. Inquiries should be directed to Terry Hamilton, Director of HIV Services at Terry.Hamilton@nychhc.org or 212-788-3604.



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