

HIV Care Services Fundamentals Call #1
Q & A
Data Care Presentation

Presenters: Karen Surita, DSHS, Data to Care Coordinator
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Data to Care Project: Public Health Strategy that uses surveillance data to identify and locate persons living with HIV who are not currently in medical care. Goals for the project are: increase proportion of people living with HIV who are linked into care and increase the proportion of people living with HIV who are retained in care.

Questions

- 1) How would rural areas use data to care?
 - DSHS can match client data against surveillance to verify that client is out of care
 - Need to contact Karen or Allyson – they can send you an excel file to enter client demographics of clients who are out of care to send to DSHS
 - This match will allow programs to focus on persons who require additional follow up

- 2) What should the collaboration/relationship look like between data-to-care and Ryan White funded outreach workers focused on returning clients to care?
 - Medical providers will identify clients and will make attempt to locate clients out of care – if unable to locate providers will send information to local health department.
 - Local health department DIS data to care staff will do additional field work if client is not in care – will attempt to identify reasons why person is not care (what were barriers)

- Local health department DIS data to care staff will work with case managers to identify additional resources
 - Do not want to duplicate services and will work with local agencies to coordinate services
- 3) How does this relate to the work already being done in the agencies funded by Early Intervention Services category?
- It can serve an additional way to contact persons who are not in care, there are various levels of outreach that programs conduct. If staff are unable to conduct field work to locate a person, the data to care staff can assist
 - It is another mechanism to identify a person who is not in care
- 4) When a Disease Intervention Specialist (DIS) Data to Care staff receives a referral to outreach to someone, will they conduct outreach for every single referral they receive or is there some criteria they must follow before they conduct outreach? (i.e., must have a copy of the official letter sent to client)
- Data to Care DIS will do a record search first to ensure client is not in care somewhere else or no longer living in the jurisdiction.
 - Data to care DIS will make phone calls and conduct outreach to client if they are not in care
- 5) How do you address clients who refuse services when approached by DIS conducting the Data to Care project?
- Don't want to overwhelm clients and will make note for those who refuse services – efforts are client centered
 - Services are available for those clients who are ready to re-engage in services
 - In an analysis done of people who refused Data to Care services or did not respond to contact attempts by a DIS in Dallas, 46% eventually got back into care without D2C assistance. 25% got back into care within 6 months of refusing services. Of those who got back into care on their own, 85% were virally suppressed at the time the analysis was run. Reasons for clients not entering care – transportation, housing, not sick, etc.
- 6) Scenario: what does a case manager, not in a jurisdiction that currently partners with DSHS for Data to Care, what can I do to get involved with the project?
- Look internally within their agency to see what is currently being done to locate clients that are lost to care
 - Identify a long-term plan to address clients lost to care
 - If provider is in one of the four areas that currently collaborates with the Data to Care project – reach out those agencies or contact

Karen or Allyson (DSHS) to initiate an assessment within organization

o Contact information for agencies:

▪ **Austin Public Health**

▪ Gabriela Torre, Program Supervisor

▪ Gabriela.Torre@austintexas.gov

▪ **Dallas County HHS**

▪ Shelley Cabrera, Operations Manager

▪ Shelley.Cabrera@dallascounty.org

▪ **San Antonio Metropolitan HD**

▪ Crystal Garza, Field Operations Manager

▪ Crystal.Garza@sanantonio.gov

▪ **Tarrant County Public HD**

▪ Joseph Lirette, First Line Supervisor

▪ JPLirette@tarrantcounty.com

- DSHS has more capacity than local jurisdictions to identify persons who are not in care

7) Does DSHS send any lab results or any updated information regarding patients to the local health departments? If so, how often is this done? Is it possible for the local Data to Care staff to have this information and then determine which patients are out of care? The reason I am asking this is because sometimes we don't have consent from patients to release information to the health department and this may sometimes create a barrier.

- Local health departments receive results for anyone who is in their jurisdiction – they receive a daily file from DSHS of clients that live in their jurisdiction
- Local health departments can determine clients that are out of care in their jurisdiction. However, DSHS has the capacity to address larger client lists than jurisdictional agencies.
- Consent to conduct outreach activities– some providers collect consent upfront from clients stating that they will be contacted by DIS if it is determined they are not accessing medical care. The timeframe for consent may vary and is dependent upon the agency.

8) What other similar programs are in other areas across the state you would like to share?

- In Tarrant County, we fund AIDS Outreach Center to conduct outreach for Ryan White clients that have fallen out of care.

Next Call: Tuesday, July 31st
1:00 p.m. – 2:00 p.m.