Panel #3

**Linkage, Re-Engagement, Retention, and Data-to-Care**

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<th>Mara Michniewicz, M.P.H.</th>
<th>Building Infrastructure to Support Linkage and Re-Engagement Efforts Statewide</th>
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<td>Emma Spencer, Ph.D., M.P.H.</td>
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<td>Meghan Daily</td>
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<td>Community Programs Coordinator</td>
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State of Florida Integrated Plan: Objectives and Strategies

• Objectives: 1.3, 2.1, 2.2, 2.3, 2.4, 2.5, 3.1, 3.2, 3.3, and 3.4

Statewide Linkage and Re-Engagement Efforts

Florida HIV/AIDS Comprehensive Planning Network (FCPN) Meeting
May 17–18, 2017
Kissimmee, FL

Mara Michniewicz, MPH
Prevention Manager
Florida Department of Health
Bureau of Communicable Diseases
HIV/AIDS Section

Division of Disease Control and Health Protection
Florida’s Plan to Eliminate HIV Transmission and Reduce HIV-related Deaths

Four Key Components

• **Test and rapid access to treatment (Test and Treat)**
• Antiretroviral pre-exposure prophylaxis (PrEP) and non-occupational post-exposure prophylaxis (nPEP) initiatives
• Routine HIV and sexually transmitted disease (STD) screening in health care settings/targeted testing in non-health care settings
• Community outreach, engagement, and messaging
Strengthening Infrastructure

• Distribution of 25-plus regional linkage and re-engagement coordinators statewide
  • Leveraging Ryan White (RW) Part B funds
  • Coordination and quality assurance for linkage and re-engagement activities
  • Local Data-to-Care activities
  • Cross-training in Partner Services
Two new Minority AIDS Initiative (MAI)–Antiretroviral Treatment and Access to Services (ARTAS) sites (Lee and Volusia County Health Departments)

Targeted Outreach for Pregnant Women Act (TOPWA) perinatal programs
  • Maintaining 7 TOPWA providers in highest incidence areas
Strengthening Infrastructure, continued

• Expansion of Department of Corrections (DOC) Prison Pre-Release Planning Program
  • Central Florida Reception Center

• Role of linkage/re-engagement staff with regard to molecular HIV surveillance and response
Capacity Building and Training

• Peer Navigation Programs

• Collaboration with STD and Viral Hepatitis Section

• Enhancements to STD PRISM database to capture more accurate linkage-to-care data
Policy Changes

• Preliminary Ryan White eligibility based on rapid HIV reactive result

• National HIV/AIDS Strategy: 2020 Update
  • Moving from 90-day linkage-to-care timeframe to 30-day linkage-to-care timeframe
Contact Information

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Data to Care

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Division of Disease Control and Health Protection
To protect, promote and improve the health of all people in Florida through integrated state, county, and community efforts.
What is Data to Care?

- High-impact prevention strategy aiming to use HIV surveillance data to link or re-engage persons who are currently not in care.
- Improves upon the typical use of HIV surveillance data for descriptive and monitoring purposes only by directly informing prevention activities to control disease.
HIV Surveillance and Data to Care

- Uses laboratory reports as markers of HIV care and generates a list of individuals who were never linked to care.
- Newly-diagnosed persons not in care within three months are sent to the field for investigation and linkage to care.
- Outcomes of investigations and linkage activities are returned to central office HIV surveillance within 80 days.
Data to Care Objectives

- Increase the percentage of HIV-diagnosed individuals who are engaged in HIV care
- Increase the percentage of HIV-diagnosed persons with an undetectable viral load
- Reduce HIV-related health disparities
Data to Care Outcome Indicators from Field Staff

- Already in care
- Linked to care
- Refused care
- Unable to locate
- Moved out of state
- Deceased
- Deleted from eHARS\(^1\)

\(^1\) Enhanced HIV/AIDS Reporting System (eHARS)
Data to Care Outcomes from Field Staff, Florida, January 2015–June 2016

- # of persons diagnosed with HIV
- Already in care
- Linked to care
- Refused
- Unable to locate
- Moved out of state
- Deceased
- Deleted from eHARS

² Enhanced HIV/AIDS Reporting System (eHARS)
Data to Care Outcome Indicators from eHARS

- In care
- Moved out of state
- Deceased
- Deleted from eHARS
- Unknown
Data to Care Outcomes from eHARS\(^1\), Florida, January 2015–June 2016

1 Enhanced HIV/AIDS Reporting System (eHARS)
In Care - Time from Diagnosis to First Lab, Florida, January 2015–June 2016

Number of persons diagnosed with HIV and in care:

- Previous Out of State Dx
- <1 month
- 1-3 months
- 4-6 months
- 7-12 months
- >=1 year
Accomplishments

- eHARS updated for over 50% of cases sent to field for investigation
- Increase in linkage to care from January 2015 through March 2016
- Decrease in time from diagnosis to first lab from January 2015 through March 2016
Challenges and Discussion

- What are the challenges for Data to Care at the state and local level?
- How can we improve the process? What does the ideal process look like?
- How do we obtain community engagement and “buy-in”?
- What additional data would you like to see?
- How do we implement program monitoring and evaluation?
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