



Making Data Count:

California's Experience Implementing a Data Improvement Plan

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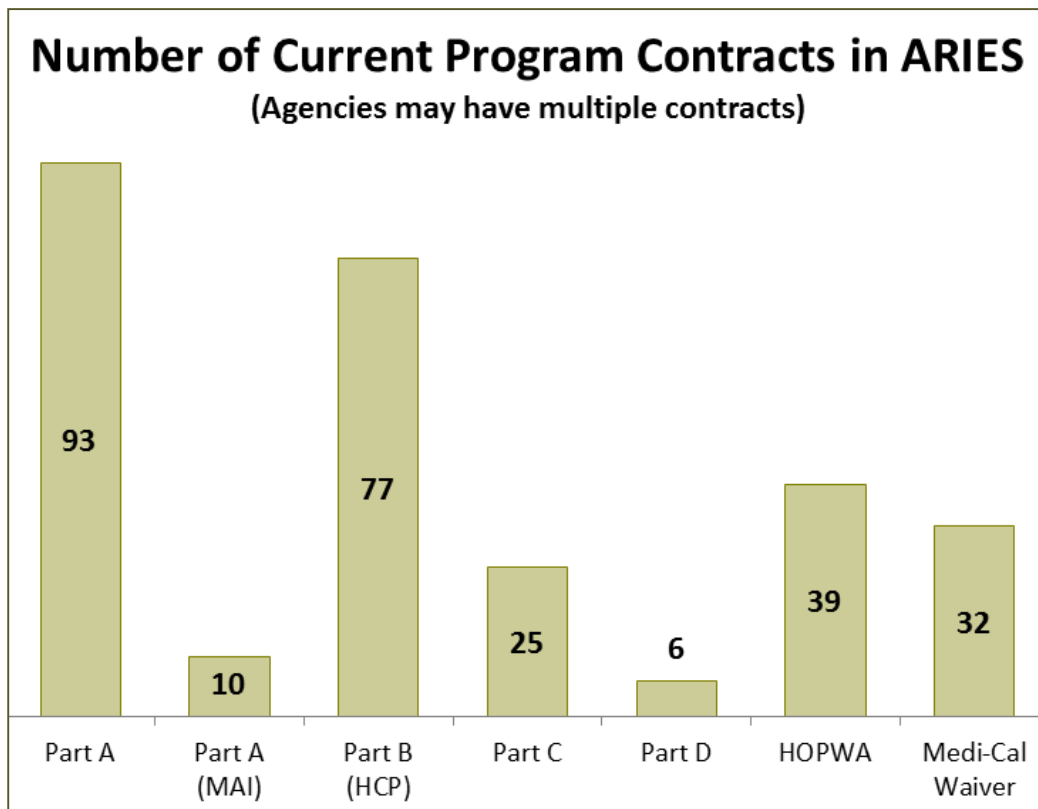
ARIES Overview

- © AIDS Regional Information and Evaluation System is a web-based, centralized HIV/AIDS client management system that allows for coordination of client services among medical and supportive service providers and provides comprehensive data for program reporting and monitoring.
- © Providers can use ARIES to meet their federal reporting requirements for Ryan White, as well as the Housing Opportunities for Persons with AIDS (HOPWA) Program. ARIES participated in the beta testing of the client level data reporting and is a Ryan White Services Report (RSR)-Ready system.
- © ARIES is a collaborative project between the California Department of Public Health, the Texas Department of State Health Services, the San Bernardino County Public Health Department, and the San Diego County Health and Human Services Agency. ARIES is now used in California, Texas, Nevada, and Colorado.



ARIES in California

- © 231 agencies currently use ARIES. These include health departments, community clinics, hospitals, housing authorities, AIDS service organizations, and food banks throughout California.
- © Most ARIES agencies are funded by Part A and Part B.
- © 1,545 users logged into ARIES during federal fiscal year (FFY) 2012.
- © 32,036 clients were served by ARIES agencies during FFY 2012.





"The DIP"

- © After rolling out ARIES in California, the State Office of AIDS turned our attention to data quality.
- © In early 2010, a team consisting of three researchers, the ARIES Help Desk manager, an office technician, and a health program specialist began meeting to discuss how to monitor and improve the quality of ARIES data.
- © We developed and wrote the ARIES Data Improvement Plan – DIP for short – which has three levels of interventions.



"The DIP"

- © Since we did not have any additional resources to implement and maintain the DIP, we designed the plan to spread the work among existing staff. This makes efficient use of limited resources and helps keep the team engaged without burning out.
- © Our team meets for 60 to 90 minutes at the beginning of each month. We use this time to manage the workflow, review provider performance, identify trends or problems, and evaluate our efforts. We rarely cancel these meetings.



Overview of Interventions





Intervention: Process Check

- ⊙ Process Checks ask: Are users entering data into ARIES?
- ⊙ A different topic is handled each month such as:
 - ⊙ Are services being entered?
 - ⊙ Are data being entered in a timely fashion?
 - ⊙ Are providers informing their clients about the ability to “share” their ARIES data with their other providers?
- ⊙ Occurs 11 to 12 times per year



Intervention: Focused Technical Assistance

- ⦿ Focused Technical Assistance (FTA) asks: What is the quality of the data being entered into ARIES?
- ⦿ Unlike typical user trainings, this intervention is narrowly focused on improving **selected** providers' ability to collect and enter **key** data elements
- ⦿ Use webinars to focus on improving data elements such as CDC Disease Stage, Insurance, and CD4 Tests
- ⦿ Occurs 7 to 8 times per year



Intervention: **ARIES** User Group

- ◎ The **ARIES User Group** asks: How are the ARIES data being used? and How can we better utilize the data?
- ◎ Webinar conference call with formal presentations by providers and ARIES staff on innovative uses of the system, demonstrations of new features, etc.
- ◎ Held 2 or 3 times per year.
- ◎ All ARIES agencies in California are invited to attend.



Process Check





Process Check

- © Here is an example of the steps we take for the Process Check on Timeliness of Service Data Entry.
- © The optimum goal for entering data into ARIES is in real-time. Some agencies may not be able to meet this goal due to staffing levels, lack of computers, or other business practices. State-funded providers who are unable to enter data in real-time have up to two weeks from the service date to enter the data.
- © We review the **Timeliness of Service Data Entry by Agency Report** in ARIES.

Review that
Month's
Report



Process Check

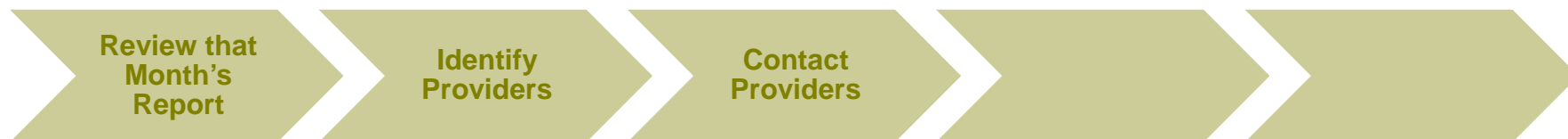
- © The **Timeliness of Services Data Entry by Agency Report** displays the average number of days (i.e., “lag days”) between when a service was provided and when it was entered into ARIES.
- © We identify those providers with 30 or more lag days. These are the providers we will contact for the Process Check.





Process Check

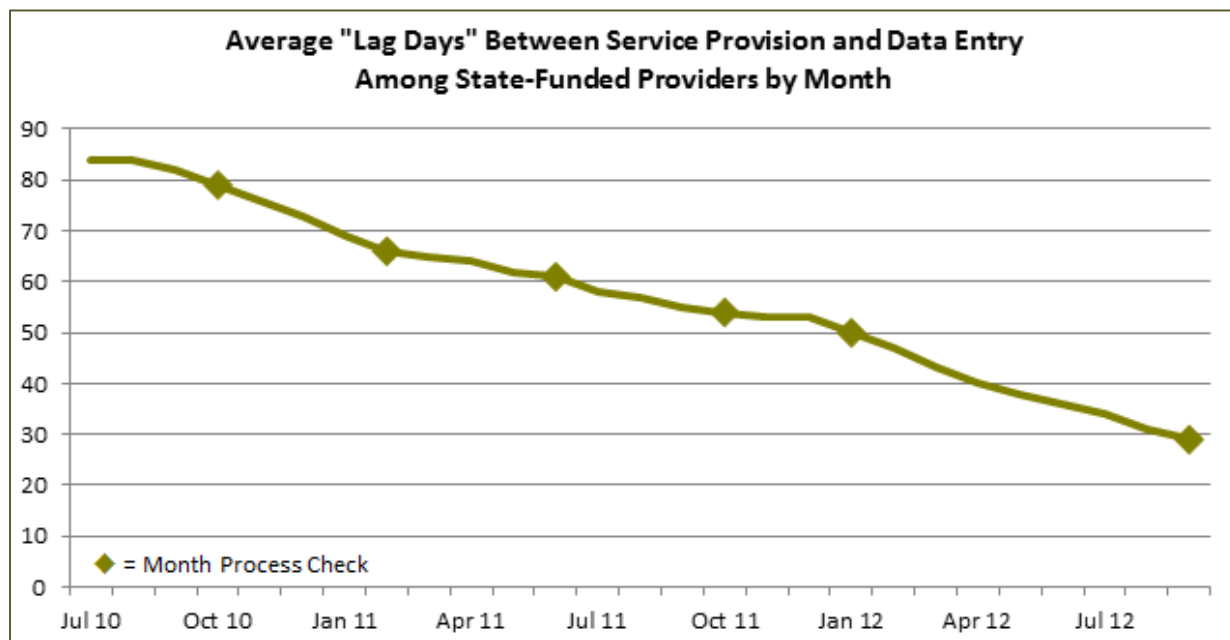
- ⦿ We e-mail those providers with lag days over 30 with a note that:
 - ⦿ Reminds them about the expectation,
 - ⦿ Explains how to identify and remedy exceptions, and
 - ⦿ Asks whether they need technical assistance in order to meet said expectations.
- ⦿ Most providers indicate that they have simply fallen behind. Some providers may identify problems – such as their access to ARIES has expired or the new data entry clerk needs training. In these cases, we link the provider to the appropriate resource to resolve the problem.





Process Check

- © We monitor agencies for improvement after the process check.
- © Since implementing the DIP, the average number of “lag days” has fallen steadily from 84 in July 2010 to 29 in September 2012.



Review that
Month's
Report

Identify
Providers

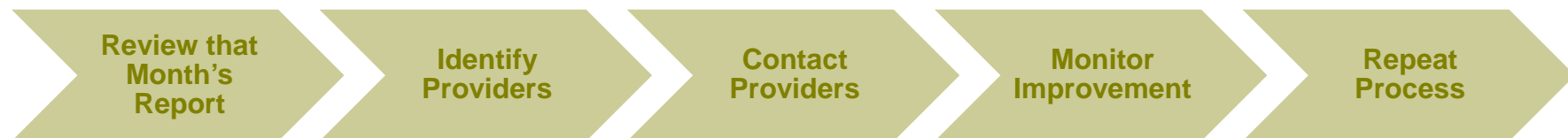
Contact
Providers

Monitor
Improvement



Process Check

- © Process Checks help us stay on top of problems. They also remind providers about keeping up-to-date with data entry so that they aren't overwhelmed with data entry backlogs during RSR season.
- © Process Checks are repeated on a cyclical basis. When we first conducted the Timeliness of Service Data Entry in October 2010, we contacted 21 providers with more than 30 lag days. In February 2011, we reviewed provider performance and repeated the check. That month, we contacted 23 providers – 15 of whom had been contacted in October and were still working on improving their timeliness.





Process Check

© Tips

- © Slow and steady – We don't operate in crisis. For example, some might think that 84 lag days needs to be corrected immediately. However, our view is that change takes time. We are confident that our interventions will improve data quality over the long haul.
- © Honey, not vinegar – We view Process Checks as friendly-reminders. Process Checks also provide an opportunity to clarify expectations, problem-solve, and build relationships with end users. This approach yields better results than simply threatening sanctions for being out of compliance.



Focused Technical Assistance





Selecting Key Data Elements

- ⦿ In order to implement the Focused Technical Assistance, we needed to decide which data elements to target. We used a three step process to prioritize our workload.

- ⦿ Each team member identified the top 25 most important data elements out of the 1,922 data elements in ARIES. We asked ourselves questions like:
 - ⦿ Are providers required to collect this data element?
 - ⦿ Is this data element used by program and providers for planning or evaluation?
 - ⦿ Is this data element included on state or federal reports?

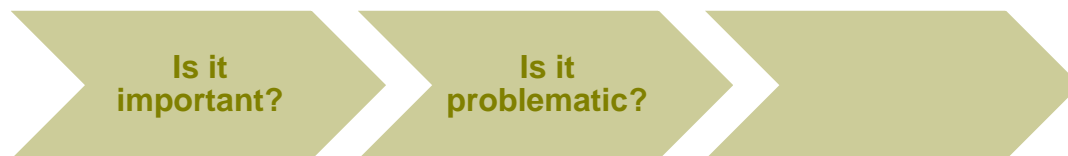
- ⦿ The individual lists were compiled into one list with 62 data elements – most of which were RSR data elements.





Selecting Key Data Elements

- © We then analyzed the frequency distributions of these 62 data elements to identify where providers were struggling. Data elements with high missing rates, high percentages of unknowns, or other data entry errors remained on our list.

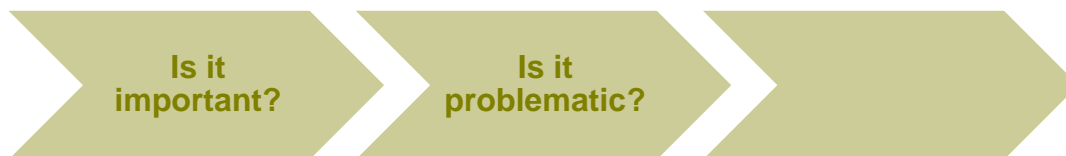




Selecting Key Data Elements

- © We did not focus on data elements that providers were having success with. For example, Gender is important. However, since Gender is a required field in ARIES, it has a 100% completion rate. The number of unknowns were almost nil. Focusing our energy on Gender meant ignoring some other data element that providers were struggling with.

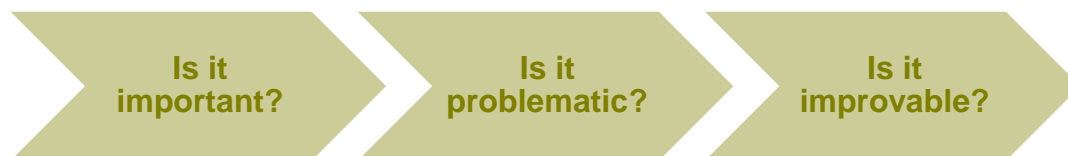
Gender	Number of Clients	% of Total
"Other" and "Refused" are counted as "Unknown"		
Female	4,964	16.63%
Male	24,383	81.67%
Transgender FTM	7	0.02%
Transgender MTF	479	1.60%
Unknown	24	0.08%





Selecting Key Data Elements

- © Lastly, we identified data elements that we could actually affect. There were some data elements that were both important and problematic for which we were unable to operationalize data checks. These fell off our list.
- © For example, Current Living Situation is an RSR-required data element and has become increasingly important since the release of the National HIV/AIDS Strategy. At the time, 36% of ARIES clients had an unknown or missing living situation. When we began working on this Focused Technical Assistance, we discovered that ARIES does not currently allow us to create the reports needed to identify problems with Current Living Situation. This data element is on our laundry list until this capability can be added to ARIES.





Focused Technical Assistance

© We have adopted 15 key data elements so far.

© Over the years, we have repeated some FTAs and adopted new ones.

FY 2010/11	FY 2011/12	FY 2012/13
<ul style="list-style-type: none">• CD4 & Viral Load Tests• CDC Disease Stage• Client Identifiers• Eligibility Documents• Federal Poverty Level• Insurance• Race and Ethnicity• Residential Address	<ul style="list-style-type: none">• CD4 Tests *• HIV Exposure Categories• HIV/AIDS Diagnosis Date• HOPWA Client Eligibility• Insurance *	<ul style="list-style-type: none">• CDC Disease Stage *• Eligibility Documents *• Federal Poverty Level *• HAART **• HIV Exposure Categories *• Living Situation **• PCP Prophylaxis• Viral Load Tests *

* Repeated FTA

** Proposed FTA



Focused Technical Assistance

- © To prepare for an FTA, we first decide how to operationalize the data check. This process is heavily influenced by the RSR and HAB HIV Performance Measures. Each FTA consists of multiple data checks.
- © Once we had identified the criteria for each data check, we develop the **FTA Monitoring Report** which allows us to monitor and evaluate each agency's performance. The report generates separate scores for each data check and one overall score. For example, we developed three data checks for the Insurance FTA to check for missing records, missing Start Dates, and unknown Insurance Sources.

Define Data Checks

Focus Group	Data Check	Error Message	Criteria
Insurance	Insurance Blanks	No Insurance Records	No Insurance records have ever been entered for this client
		No Current Insurance Records	No Insurance records cover any portion of the last 365 days since the <u>run date</u> of the report
	Insurance Dates	Missing Start Dates	One or more Insurance records with a blank Start Date were entered within the past 365 days since the <u>run date</u> of the report
	Insurance Source	Unknown/Unreportable Source	There are <u>no</u> Insurance records covering any portion of the last 365 days since the report <u>run date</u> that have one of the following Sources: Medi-Cal/Medicaid, Medicare, No insurance, Other, Other public insurance, Private 1/2/3, Public 1/2, Veteran. These are the Insurance Sources that are reported as "known" values on the RSR (see "RSR Calculations 2009.xls").

FTA Monitoring Report

Agency Name	Insurance Blanks	Insurance Dates	Insurance Source	Overall Insurance Score
Agency G	83.10%	47.89%	37.32%	36.62%
Agency H	48.94%	38.30%	38.30%	38.30%
Agency I	73.58%	47.17%	43.40%	39.62%
Agency J	92.86%	87.76%	41.84%	41.84%
Agency K	51.39%	46.35%	44.33%	42.07%
STATEWIDE SCORE	90.18%	85.28%	82.12%	80.22%
Agency G	91.46%	81.71%	80.49%	80.49%
Agency H	93.67%	82.58%	81.76%	80.85%
Agency I	82.54%	84.13%	82.54%	80.95%
Agency J	82.76%	99.14%	96.55%	81.03%
Agency K	87.18%	86.54%	83.33%	81.41%
Agency K	99.79%	99.79%	99.79%	99.58%
Agency L	100.00%	100.00%	100.00%	100.00%



Focused Technical Assistance

- © We review the **FTA Monitoring Report** to see how agencies are performing. Depending on the FTA topic, we may look at the performance of providers for a specific program (such as Part B or HOPWA), all state-funded providers, or all ARIES agencies regardless of funding.
- © We decide which agencies to invite based on how they perform compared to the overall statewide score or program benchmarks.
- © We invite the selected agencies to a webinar to learn more about the particular data element. The audience can vary from 20 to 60 agencies depending on the topic and provider performance.





Focused Technical Assistance

- © We hold the webinar on that month's topic. The webinars typically run between 30 and 60 minutes long. The presentations follow a basic format:
 - © Tell them why it is important to collect and enter data accurately and correctly.
 - © Demonstrate how to correctly enter the data.
 - © Show them how to identify and remedy data entry problems using the **Fix-It Reports**.
 - © Answer questions. Remind them where to go for more help.
- © We take roll so we can follow up with providers who don't attend. The presentations are posted on www.projectaries.org so that other grantees and providers can use them.





Focused Technical Assistance

- ⦿ One principle of the FTA is that it is not enough to tell providers there's a problem with their data, we have to give them tools to identify and resolve the problem.
- ⦿ Using the same criteria we defined for the **FTA Monitoring Report**, the ARIES Help Desk Manager designed **Fix-It Reports** in ARIES.
- ⦿ The **Fix-It Reports** display all the client records for the reporting period. Those records with problems appear at the top of the report with descriptions of the problems.
- ⦿ After the webinar, providers run the **Fix-It Report** to easily identify problem records that that need attention.



Focus Group	Data Check	Error Message	Criteria
Insurance	Insurance Blanks	No Insurance Records	No Insurance records have ever been entered for this client
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	Insurance Source	Unknown/Unreportable Source	There are <u>no</u> Insurance records covering any portion of the last 365 days since the report run date that have one of the following Sources: Medi-Cal/Medicaid, Medicare, No insurance, Other, Other public insurance, Private 1/2/3, Public 1/2, Veteran. These are the Insurance Sources that are reported as "known" values on the RSR (see "RSR Calculations 2009.xls").

Fix-It Report

< Back			Home			Find			New			Reports			Shortcuts			Help			Logout		
DEMO			DEMO			DEMO			DEMO			DEMO			DEMO			DEMO					
Fix-It: Insurance																							
ARIES ID	Client	Errors																					
10001498	Box, Jack N	Unknown Source,																					
10000085	Ashton, Zack J	No Insurance Records																					
10003892	Doe, John B	No Insurance Records																					
10004091	Flintstone, Fredrick F	No Insurance Records																					
10001451	Smith, Adam F	No Insurance Records																					
10000239	Jones, Zack F	No Current Insurance Records,																					
10001736	Berkington, Geoffrey F	No Current Insurance Records,																					
10000327	Berry, Keera K	No Current Insurance Records,																					
10001305	Charles, Raymond H	No Current Insurance Records,																					
10003891	Flash, Jack B	Missing Start Dates,																					
100	Exweb, Steve X																						

Client Data are fictitious



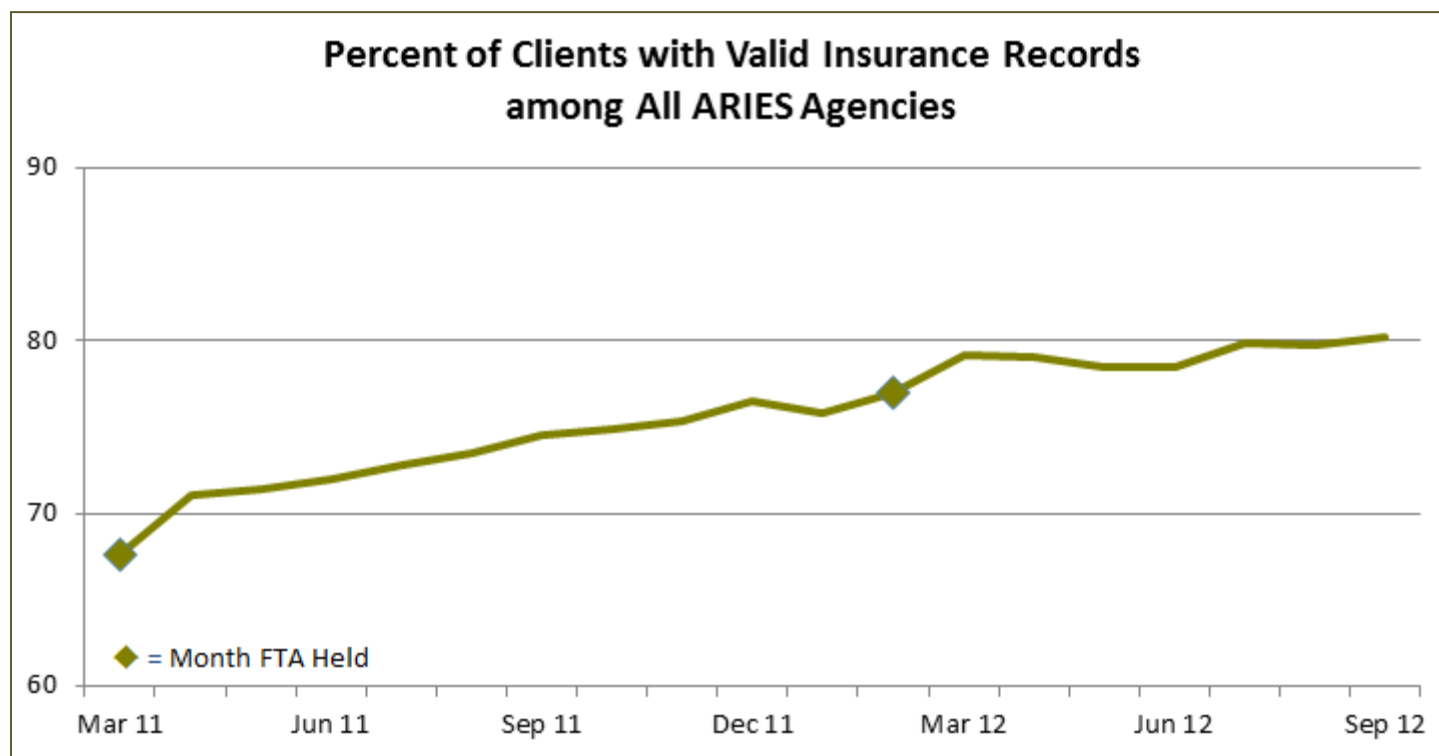
Focused Technical Assistance

- © We review subsequent **FTA Monitoring Reports** to see if the selected providers have improved or whether additional follow-up is needed.
- © To view the global impact of our efforts, we also track the overall statewide scores. Insurance is one of the data elements monitored through the DIP. Compliance among all ARIES agencies has steadily improved from 67.6% in February 2011 to 80.2% in September 2012. Because of the importance of this data element, we repeated this FTA.





Focused Technical Assistance





Focus Technical Assistance

© Tips

- © Can't Solve Every Problem – Resist the desire to fix everything. Given limited time and resources, we focused only on the most critical data elements.
- © Framing the Situation – FTAs are really about making data count! Data collection is more than just a bureaucratic chore. We tell our data collectors why a particular data element is important and how it is used by providers, grantees, researchers, and others. We think staff are more committed to data quality when they know how their efforts fit into the larger picture.
- © Lessons Learned – We are constantly learning from the DIP. We make adjustments to our plan throughout the year. We share ideas for system enhancements that arise from FTAs. We annually evaluate our work and make changes for the following year.



ARIES User Group





ARIES User Group

- ⦿ This is a forum for all participants to share and learn from each other.
- ⦿ Held 2 or 3 times per year.
- ⦿ All ARIES agencies in California are invited to participate.
- ⦿ Presenters discuss their work, share report templates with other users, demonstrate new features, reinforce policies, and glean feedback for potential or pending enhancements.



ARIES User Group

- © Providers have presented on innovative ways to utilize ARIES for (a) finding clients who have fallen out of care, (b) minimizing the impact of budget cuts on client care, (c) monitoring for duplicative services, and (d) identifying clients who should be on HAART.
- © ARIES Staff have demonstrated new features such as (a) using the Substance Abuse and Mental Illness Symptoms Screener (SAMISS), (b) running the HAB Quality Management Indicators and Client Follow-Up Reports, and (c) documenting Low Income Health Program (i.e., California's Bridge to Health Care Reform) Enrollment.
- © There have also been presentations that reinforce policies and procedures like (a) safeguarding data security and client confidentiality and (b) preventing and resolving duplicate ARIES clients.



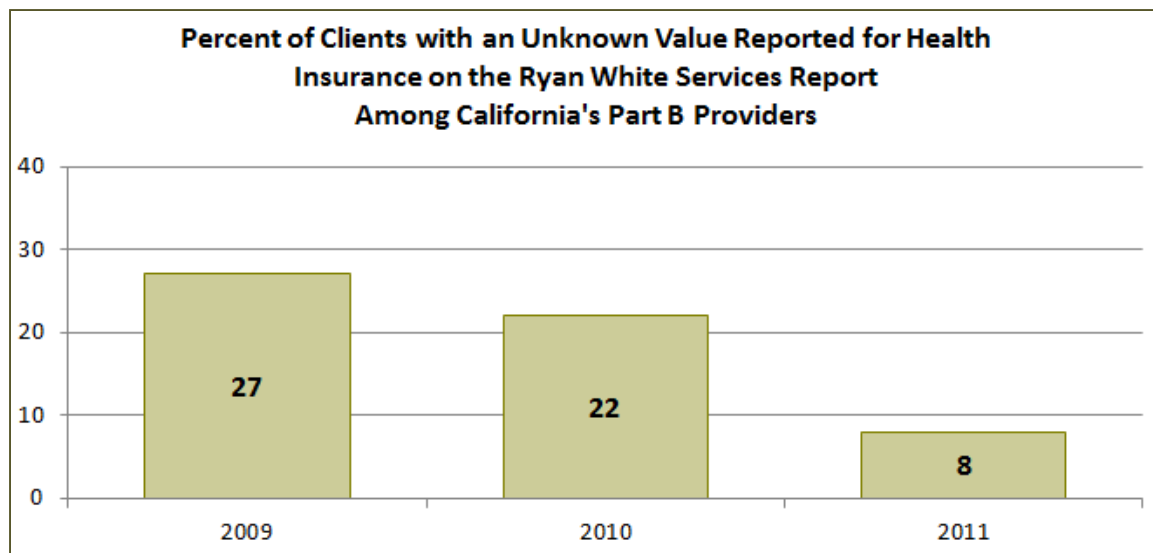
Benefits of the DIP





Benefits of the DIP

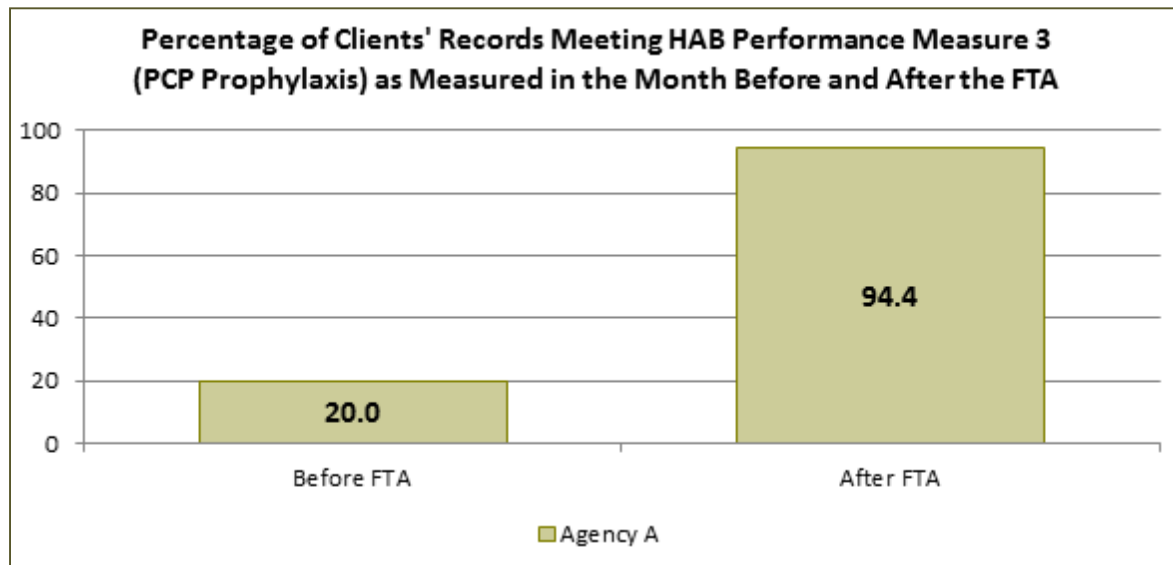
- © The DIP is closely aligned with the RSR and HAB's efforts at improving data completeness.
- © When providers run the **Fix-It Reports**, there is a decrease in missing and unknown values related to that particular data element.
- © When we plan next year's topics, we will use the **RSR Completeness Reports** to help prioritize which data elements to focus on.





Benefits of the DIP

- © The FTAs also help ensure that the data used to calculate HAB Performance Measures are complete and accurate.
- © For example, Agency A attended the PCP Prophylaxis FTA and then ran the **Fix-It Report**. Theoretically, their clients were meeting the measure at least 94.4% of the time all along. It just took a while, following the FTA, for the data to catch up and accurately reflect the care that was being delivered.





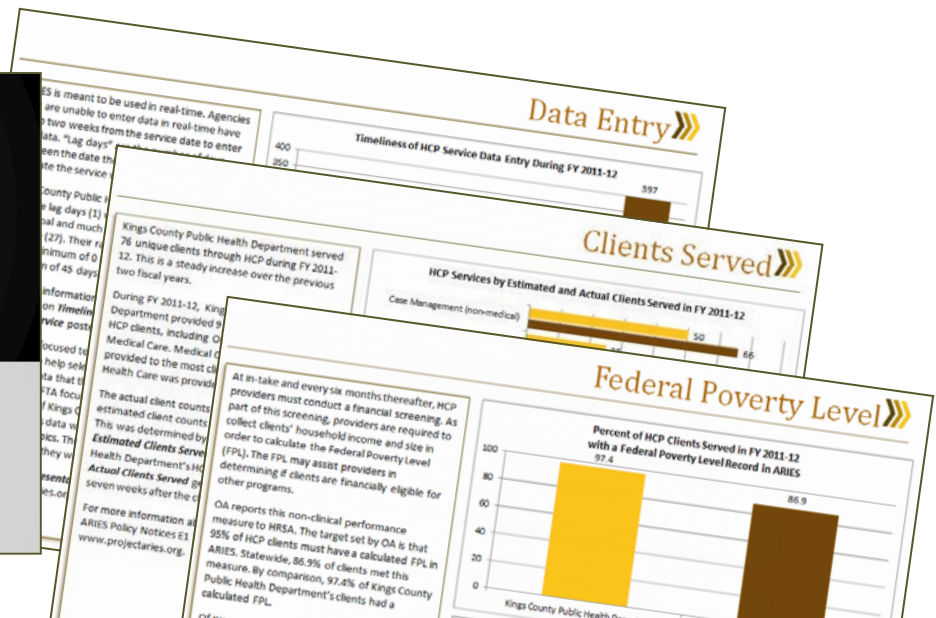
Benefits of the DIP

- © We have integrated data into the annual contract monitoring process by generating an **HIV Care Program Contract Monitoring Report** for each provider. Contract Monitors review these reports during their site visit to identify where the providers are doing well and where they could improve. Among other things, the reports demonstrate the value of quality data and reinforce the expectations for data collection.

HIV Care Program
Contract Monitoring Report *for*
Kings County Public Health Department

Fiscal Year 2011-12

Prepared by the California State Office of AIDS
Based on Data from the AIDS Regional Information & Evaluation System





Benefits of the DIP

- © These and other benefits have been achieved by using existing staff resources more efficiently. The entire DIP takes six staff members about 610 hours – or almost one-third of an FTE – per year to manage and implement.

Intervention	Staff	Estimated Hours per Year	Estimated FTE* per Year
Process Checks	Office Technician	120	0.06
	Help Desk Manager	24	0.01
Focused Technical Assistance	3 Researchers	188	0.09
	Help Desk Manager	74	0.04
ARIES User Group	Health Program Specialist	78	0.04
Monthly DIP Meetings	Health Program Specialist	18	0.01
	6 Staff	108	0.05
Total	6 Staff	610	0.29

* Full time equivalent is based on 2,080 hours per year



For More Information

© Grantees **outside of California** who would like to learn more about adopting ARIES, please contact:

Jenny Martin, ARIES Project Manager

The Queenstone Group

jmartin@queenstonegroup.com

415-624-7950



For More Information

- © Grantees and providers who would like to learn the ARIES Data Improvement Plan, please contact:

Karl Halfman, Health Program Specialist I
California Department of Public Health, Office of AIDS

karl.halfman@cdph.ca.gov

916-449-5966

- © Or visit www.projectaries.org and click on “Training” to access DIP materials.



County of San Bernardino Department of Public Health Ryan White Program

**Making Data Count:
California's Experience Implementing a Data Improvement Plan**

TGA Perspective

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Riverside/San Bernardino, CA TGA

Part A and MAI

Inland Empire HIV Planning Council and Clients

County of San Bernardino



Administrative Agent

County of Riverside



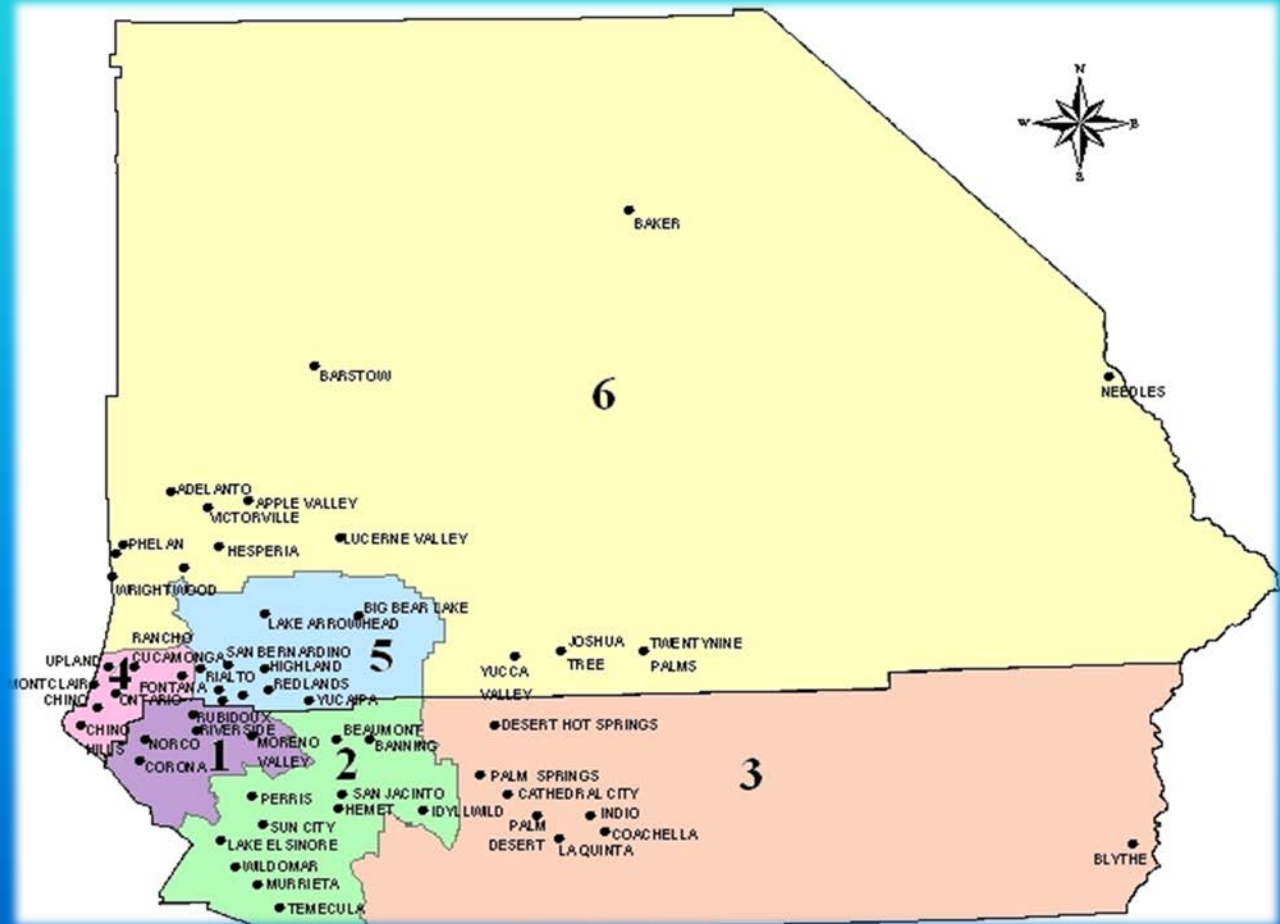
Intergovernmental Agreement

Riverside/San Bernardino, CA TGA

Population
4.2 Million

8,000+
PLWHA

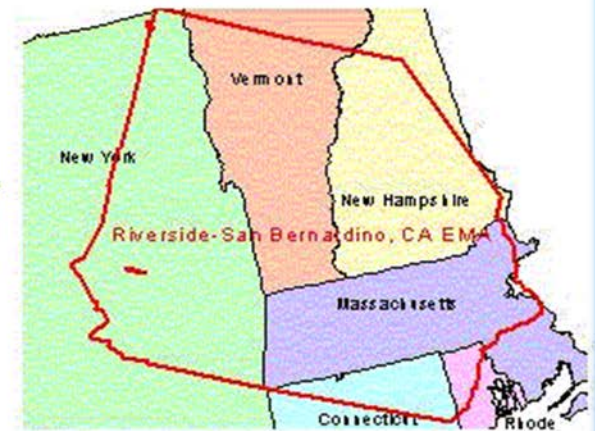
4,000+
Clients



We're Huge!

Largest RW
Jurisdiction

27,407 sq. mi



Unique Barriers

Unique Region

Distance



West Coast / East Coast



Riverside/San Bernardino, CA TGA

Award = \$7.9M

6 Providers

12 Service Locations

13 Funded Services

Medical Care, Medical Case Management, Pharmacy, Mental Health, Substance Abuse, EIS, Dental, Home and Community-Based Services, Food, Transportation, Case Management, Housing, and Psychosocial Services.

Local Data Improvement

- Data Improvement Activities
- Completeness Progress 2010 – 2011
- Challenges/Successes



Data Improvement Activities

1. Contracts / Policies
2. Technical Leads
3. Fix-it Reports
4. Missing RSR Data Report
5. CA's Focused TA Webinars
6. ARIES Data Reviews
7. Annual On-site Verification



#1: Contracts / Policies



- Contracts
 - Required to utilize ARIES
 - Required to input data within 20 days
 - Required to comply with Policy Letters
- Policies
 - Required to input service data within 20 days
 - Required to designate a Technical Lead
 - Required to maintain minimum data requirements

#1: Contracts / Policies



- Policy: Minimum Data Requirements
 - List Format – By ARIES Screen (*Example*)

ARIES MINIMUM DATA REQUIREMENTS - by ARIES Screen

MAIN TAB	Medical	Medical	Medical	Medical
SECOND TAB	Basic Medical	Basic Medical	Basic Medical	Medical History
EDIT BUTTON	Basic Medical	Basic Medical	Basic Medical	Medical History
SECTION		HIV Tests	AIDS Defining Conditions	Tests / CD4 and Viral
	CDC Disease Stage	HIV Test Date	AIDS Defining Condition	CD4 Date
	Source	Result	Diagnosis Date	T Cell Count
	Date First HIV+	Post-Test Counseling & date		Viral Load Date
	Year First HIV+			Viral Load Value
	AIDS Diag Date (if applicable)			
	AIDS Diag County			
	AIDS Diag State			(Update biannually...
				...at least 90 days apart)

#1: Contracts / Policies



- Policy: Minimum Data Requirements
 - List Format – By Report (*Example*)

ARIES MINIMUM DATA REQUIREMENTS - by Report				
MAIN TAB	Medical	Medical	Medical	Medical
SECOND TAB	Basic Medical	Basic Medical	Basic Medical	Medical History
EDIT BUTTON	Basic Medical	Basic Medical	Basic Medical	Medical History
SECTION		HIV Tests	AIDS Defining Conditions	Tests / CD4 and Viral
RSR	CDC Disease Stage			CD4 Date
	Source			T Cell Count
	Date First HIV+			Viral Load Date
	AIDS Diag Date (if applicable)			Viral Load Value
Perf. Indicators	CDC Disease Stage	HIV Test Date	AIDS Defining Condition	CD4 Date
		Result	Diagnosis Date	T Cell Count
		Post-test Counseling (date)		

#1: Contracts / Policies



- Policy: Minimum Data Requirements
 - Screen Shot Format (*Example*)

ARIES DATA FORMS

RWP Required Fields (if applicable) = Orange Boxes

Client Name: _____

Medical: Medical History: Medical History: Tests / CD4 and Viral

CD4 Date *	T Cell Count *	%	Viral Load Date *	<=>	Value *	Test Type	Log
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

NOTE: Both CD4 and Viral Load test results should be collected **twice annually** at a minimum....and at least **90 days apart** to measure progress.

Roche PCR St
Roche PCR Ul
Bayer bDNA
BioMerieux Nu

#2: Technical Leads



- Contractually required to write TL policy
- Contractually required to designate a TL
- Technical Lead Responsibilities:
 - Obtaining RWP approval for new ARIES users
 - Troubleshooting IT issues and contacting ARIES Help Desk
 - Communicating ARIES requirements to agency staff
 - Mentoring / Training agency staff
 - Participating on monthly Technical Lead teleconferences

#3: Fix-it Reports



- State-Developed ARIES QA Reports (July 2010)
- Assess data completeness at client-level
- Current Fix-it Reports:
 - Client Identifiers
 - CDC Disease Stage (HIV Status)
 - Residential Address
 - Insurance
 - Poverty Level
 - Race & Ethnicity
 - HIV/AIDS Diagnosis Date
 - HIV Exposure Categories (Risk)
 - CD4 Count
 - Viral Load
 - PCP Prophylaxis

#3: Fix-it Reports



EXAMPLE: Choose report in list:

Client Reports

[Pending Eligibility Documents](#)

Displays client, staff, document, intake date, and client contact information for each eligibility document whose status is pending. Filter by intake date.

[Client Status](#)

Displays client name, current status, previous status, date of last change, reason, and staff person who changed the clients status for clients with selected status values over a range of dates.

[Client Listing by Agency Client ID](#)

Agency client ID and Client last name first name

[Fix-It: Client Identifiers](#)

Lists clients served within a date range, and any problems with client identifiers

[Fix-It: CDC Disease Stage](#)

Lists clients served within a date range with CDC Disease Stage, AIDS Diagnosis Date, and AIDS Defining Conditions

#3: Fix-it Reports



EXAMPLE: Enter parameters

Report Filter Values

Fix-It: CDC Disease Stage

Service Line Item Service Date

Between

Display

results Display print format

Report >

Export



#3: Fix-it Reports



Fix-It: CDC Disease Stage

ARIES ID	Client	CDC Disease Stage	AIDS Date (yyyy-mm-dd)	Errors
		Unknown	2012-01-27T00:00:00-08:00	Missing CDC Stage, AIDS Date indicates AIDS,
		Unknown	1993-01-01T00:00:00-08:00	Missing CDC Stage, AIDS Date indicates AIDS,
		Unknown	2010-01-01T00:00:00-08:00	Missing CDC Stage, AIDS Date indicates AIDS,
				Missing CDC Stage,
				Missing CDC Stage,
		HIV positive, symptomatic, not AIDS		AIDS Defining Conditions Exist,
		HIV positive, asymptomatic	1999-12-07T00:00:00-08:00	AIDS Date indicates AIDS, AIDS Defining Conditions Exist,
		HIV positive, symptomatic, not AIDS	2012-02-15T00:00:00-08:00	AIDS Date indicates AIDS,
		HIV positive, disease stage unknown	2011-11-16T00:00:00-08:00	AIDS Date indicates AIDS,



#4: Missing RSR Data Report

- Assess data completeness at client-level – RSR Elements
- Example: Select Report

A screenshot of a web application interface. At the top, there is a navigation bar with several tabs: 'AGENCY INFO', 'FUNDING & CONTRACTS', 'SERVICES PROVIDED', 'RSR/RDR' (which is highlighted in purple), 'LAB BATCH DATA ENTRY', and 'AGENCY UTILITIES'. Below the navigation bar, the text 'RSR/RDR ARIES' is displayed in the top right corner. The main content area is titled 'San Bernardino/Riverside EMA' and 'RSR/RDR Wizard'. There are three links listed, each with a corresponding description:

Ryan White HIV/AIDS Services (RSR) Export	Exports the Ryan White HIV/AIDS Services to an XML file (for 2009 and later)
Ryan White HIV/AIDS Program Annual Data Report	Displays the HRSA RDR Report (for 2007 and later)
CARE Act Data Report	Displays the HRSA CADR Report (for 2006 and earlier)

The first link, 'Ryan White HIV/AIDS Services (RSR) Export', is circled in yellow.

#4: Missing RSR Data Report

- Example: Enter Parameters

RSR Export

Agency or Administrative Agency San Bernardino/Riverside EMA Aggregate data for Administrative Agency

Reporting Period 1/1/2011 - 12/31/2011
From To

Missing RSR Data Report **Include Medical Data** Yes

Sort By Client

Data Elements All Elements

Report > **Cancel**

#4: Missing RSR Data Report

- Example: Report Output – XML File

Export Results:

Export Format ▼

Export

	C	D	F	G	H
1	lastName	firstName	StaffLastName	StaffFirstName	Missing RSR Data
2	Last Name1	First Name1	Smith	Lilly	AIDS Year;
3	Last Name2	First Name2	Gomez	Lisa	Enrollment Status;
4	Last Name3	First Name3	Gomez	Lisa	Insurance;
5	Last Name4	First Name4	Smith	Lilly	Risk Factors;
6	Last Name5	First Name5	Ross	Richard	Risk Factors;
7	Last Name6	First Name6	Ross	Richard	Risk Factors; Insurance;
8	Last Name7	First Name7	Gomez	Lisa	AIDS Year; Risk Factors; Insurance;
9	Last Name8	First Name8	Jones	Sheilah	Enrollment Status; Insurance;

#5: Focused TA Webinars



- Local providers and RWP staff have participated in several State FTA webinars
- Information directly from the State
- Opportunity for providers to share end-user experiences, challenges, ideas

#6: ARIES Data Reviews



Biannual comprehensive review of data completeness

MONITORED ELEMENTS			
	Total	%	Target
Clients with NO CDC Disease Stage recorded in ARIES	0	0.0%	< 5.0%
Clients with Non-Share Status recorded in ARIES	54	2.6%	0.0%
NO Proof of HIV Diagnosis Documentation recorded in ARIES	57	2.7%	< 5.0%
NO Agency Consent Form Recorded in ARIES	73	3.5%	< 5.0%
NO ARIES Consent Form Recorded in ARIES	28	1.3%	< 5.0%
NO HIPAA Notification Form Recorded in ARIES	84	4.0%	< 5.0%
NO Proof of Income Documentation Recorded in ARIES	398	19.0%	< 5.0%
NO Proof of Residency Documentation Recorded in ARIES	549	26.3%	< 5.0%
NO Proof of Insurance Documentation Recorded in ARIES	294	14.1%	< 5.0%
Housing Clients Exceeding Usage Limitation N=38	1	2.6%	0.0%
TB			
Agency provided client Medical and/or MCM Services in time period			1488
	Total	%	Target
NO TBMI Date complete or within time frame or TBMI not complete	528	35.5%	< 5.0%
NO TB Screening during the period N=952	1	0.1%	<10.0%
NO PPD/TST read date or IGRA date entered N= 1384	166	12.0%	< 25.0%
CD4 and Viral Load			
Non-Usable CD4 and Viral Load Data in Time Period (2 of each test at least 60 days apart)	845	40.4%	<10.0%

#7: On-site Verification



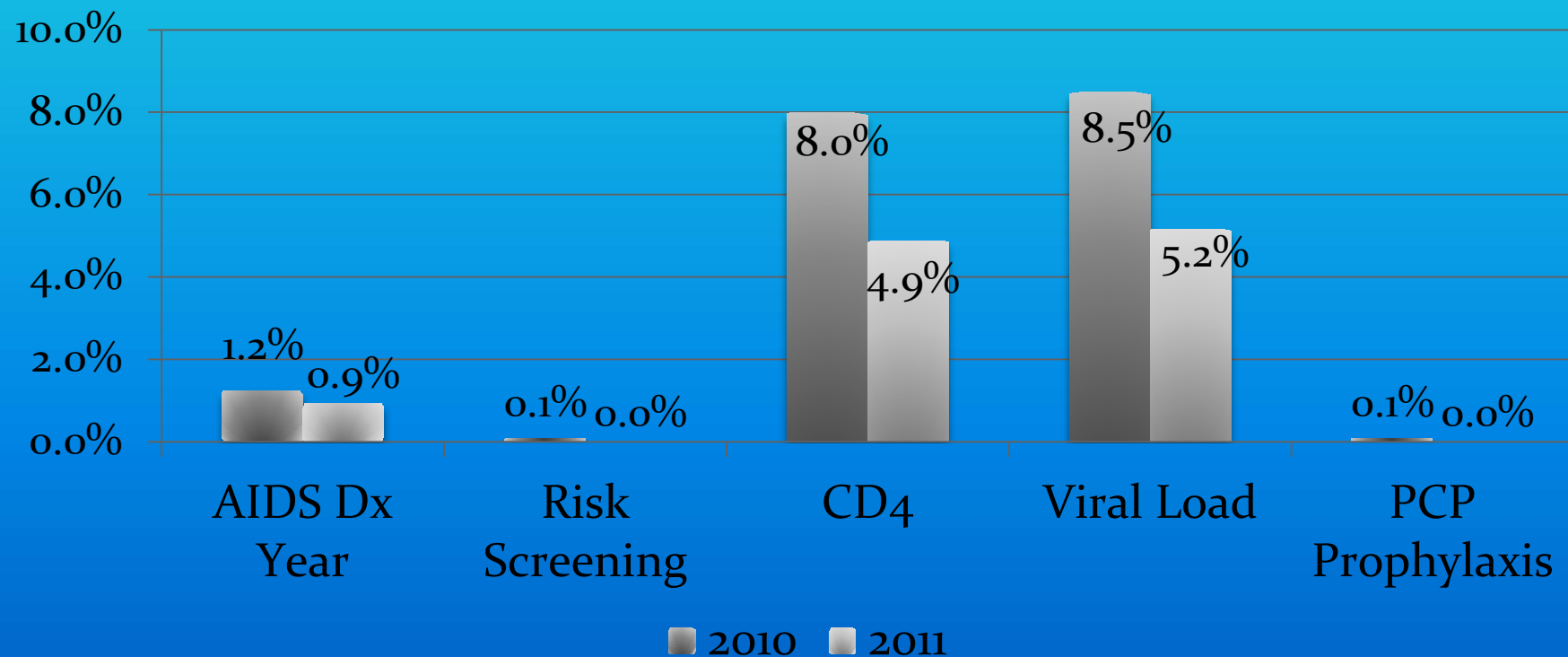
- Annual on-site monitoring visits
- Verification of ARIES Data
 - Select 5 records with complete data in ARIES
 - Review charts for backup documentation
 - If one element cannot be verified, select 5 more charts
 - Again, if one of those cannot be verified, select 5 more charts
- Require written corrective action plans for any deficiencies
- Follow-up visits for serious deficiencies

Progress 2010 to 2011



Example: No Values

AGENCY X - RSR COMPLETENESS Percent of Element with No Value

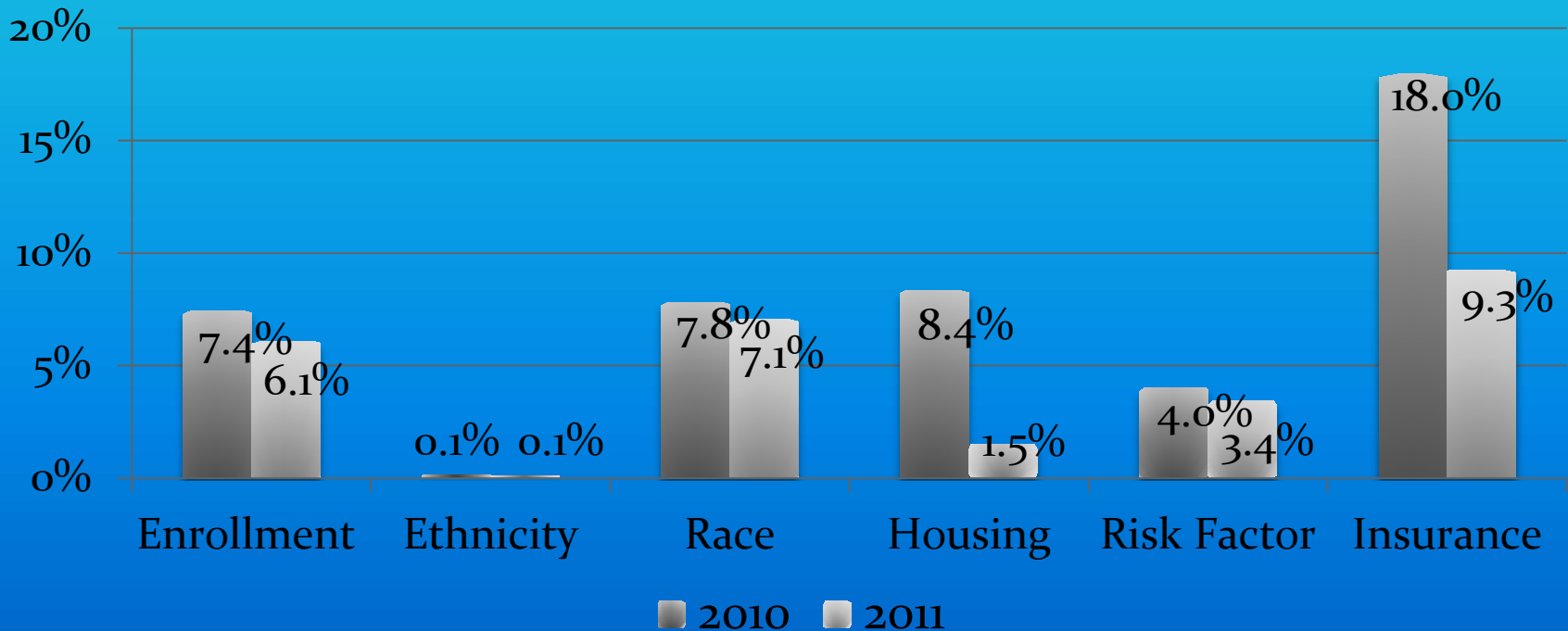


Progress 2010 to 2011



Example: Unknown Values

Agency X - RSR COMPLETENESS Percent of Element with Unknown Value



Challenges / Successes

Challenges

- Managing multiple requirements, overload
- Helping to keep ARIES current
- Maintaining communication
- Staff reductions (at all levels)

Successes

- Data focus
- Close relationship with ARIES partners, state, agencies
- Agency buy-in
- Improved data collection





QUESTIONS?