

# Quality Improvement Profile

The NYSDOH/AIDS Institute's HIV Quality of Care Program has compiled crucial information from your HIV quality improvement (QI) program into a single profile report.

This quality profile contains longitudinal performance data on key quality indicators derived from the organizational HIV treatment cascade self-review, such as viral load suppression. It highlights quality improvement plans developed by the organization based on results of the review, consumer involvement in this process, as well as feedback from the quality coach and contract manager. Capacity building information such as participation in a quality learning network or regional group is also included. Please use this report to review the HIV QM program's effectiveness and to make changes if needed. Also, please let us know if there is an update that should be made to the contact information. If you have any questions or would like to request technical assistance or coaching for your HIV QM program, please contact Dan Belanger at [Daniel.Belanger@health.ny.gov](mailto:Daniel.Belanger@health.ny.gov).

Preliminary Performance Data  
**Month, Date, Year**

Report Completed  
**Month, Date, Year**

## Program Name:

## Clinic Information

<i>Type of Clinic</i>	<b>Clinic Name</b>	<b>Address</b>	<b>City</b>	<b>Zip</b>

## Important Contacts

<i>HIV Medical Director</i>	(Contact name)	(Email address)	(Phone number)
<i>HIV Program Administrator</i>			
<i>Lead QI Contact</i>			

# Regional Group/Learning Network Participation

Affiliation:

Participated in Group QI Project?

Focus:

## Organizational HIV Treatment Cascade

### Definitions of Key Indicators

On ARV Therapy: Documented prescription of one or more antiretroviral medications at any time during the review year.

Any VL Test: Documentation of at least one viral load test at any time during the review year.

VL Test within 91 Days (Newly Diagnosed Patients): Documentation of at least one viral load test performed within 91 days of initial HIV diagnosis.

Suppressed Final VL: A value of less than 200 copies/mL on the final viral load test during the review year. Patients with no documented viral load test during the review year are scored as unsuppressed.

Suppressed within 91 Days (Newly Diagnosed Patients): A value of less than 200 copies/mL on any viral load test performed within 91 days of initial HIV diagnosis. Patients with no documented viral load test during this period are scored as unsuppressed.

3-day Linkage to Care (Patients Newly Diagnosed Within the Organization): A time interval of three days or less from initial HIV diagnosis to provision of HIV care. Prior to 2019, documentation of HIV care was based exclusively on visit history (seen by a provider who could prescribe ARVs, whether or not this was done), and an exception was made in 2017 (only) for individuals seen as inpatients (linkage within 30 days); in 2019, documentation of first ARV prescription was also used for this, and there were no exceptions to the 3-day limit.

### Key Indicators From 2017-2019

#### Figure 1. Newly Diagnosed Viral Load Suppression Rates at Organizational Level from 2018-2019

**Note:** Among newly diagnosed patients in 2017, the final VL suppression rate was reported as \_\_% (n=\_\_).

#### Figure 2: Other New to Care Viral Load Suppression Rates at Organizational Level from 2017-2019

#### Figure 3: Established Active Viral Load Suppression Rates at Organizational Level from 2017-2019

#### Figure 4. Time to Linkage Pie Chart

**Figure 5. 2019 Viral Load Suppression Rates by Age at Organizational Level**

**Figure 6. 2019 Viral Load Suppression Rates by Race and Ethnicity at Organizational Level**

**Table 1: Indicator Scores at Organization Level for 2017-2019**

Patient Group	Indicator	2017		2018		2019	
		Org. Score	State Median	Org. Score	State Median	Org. Score	State Median
Newly Diagnosed	3-day Linkage to Care	0	65%	40% (N=25)	41%	62% (N=21)	52%
	On ARV Therapy	50% (N=2)	91%	83% (N=70)	96%	92% (N=37)	100%
	VL Test within 91 Days			93% (N=70)	93%	89% (N=37)	95%
	Suppressed Final VL	50% (N=2)	65%				
	Suppressed within 91 Days			45% (N=70)	45%	49% (N=37)	50%
	Baseline Resistance Test					49% (N=37)	74%
Other New to Care	On ARV Therapy	88%(N=546)	96%	97% (N=344)	97%	93% (N=289)	100%
	Any VL Test	87% (N=546)	97%	89% (N=344)	99%	87% (N=289)	98%
	Suppressed Final VL	55% (N=546)	70%	51% (N=344)	74%	50% (N=289)	78%
Established Active	On ARV Therapy	99% (N=1188)	99%	99% (N=1408)	99%	92% (N=1365)	99%
	Any VL Test	96% (N=1188)	99%	95% (N=1408)	99%	92% (N=1365)	99%
	Suppressed Final VL	66% (N=1188)	88%	68% (N=1408)	88%	66% (N=1365)	89%
Open Previously Diagnosed (Active & Inactive)	On ARV Therapy	81% (N=1453)	92%	77% (N=1873)	95%	89% (N=1540)	96%
	Any VL Test	78% (N=1453)	92%	71% (N=1873)	93%	82% (N=1540)	93%
	Suppressed Final VL	54% (N=1453)	80%	51% (N=1873)	80%	59% (N=1540)	83%




## Quality Improvement Interventions (Self-Reported for 2019)

[Organization X] submitted descriptions of their current or planned intervention(s) to improve the rates of chosen indicators, target chosen populations, and/or address chosen comorbidities.

### Improvement Goals

Measures	Baseline data	Goal
1.		
2.		
3.		

### Intervention Description

### Consumer Involvement

### Results

### Coach's Feedback and Updates on Cascade QI Plan

### Contract Manager Comments and Updates

### [AIDS Institute Reporting System (AIRS) Outcomes Data]