2018 National Ryan White Conference on HIV Care & Treatment
Getting to Zero: Improving the Quality of Ryan White Services Report Data: The New York City Experience

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An annual calendar year report submitted by Ryan White (RW) grant recipients and sub-recipients to the Health Resources and Services Administration (HRSA).

- Consists of a Recipient, Provider and Client Report
- Includes client-level demographic, service and clinical data
- Reports clients eligible for Ryan White services based on HIV status, income and housing status
HRSA establishes annual benchmarks to measure:

- **Completeness** of demographics and clinical data to monitor eligibility for Ryan White services and to facilitate improvement on data completeness.
- **Quality** of reported clinical data
- These benchmarks can change from year to year.
- Feedback on benchmarks happens several months following report submission.
Examples of Benchmarks

• **Less than 10% missing values** for six client-level data elements: Federal poverty level (income); Health insurance status; Housing status; Viral load; Antiretroviral therapy; HIV Risk Factors

• **Less than 50% ‘No’ or missing values** for mental health screening and/or substance use screening; **less than 90% ‘No’ or missing values** for PCP prophylaxis and Hepatitis B Vaccination
The NY EMA and the 2017 RSR

As shown on the following map, the New York Eligible Metropolitan Area (NY EMA) includes the 5 counties of NYC, and Rockland, Putnam, and Westchester counties.

- **89** agencies submitted Ryan White Services Report (RSR) data under the NYC DOHMH Ryan White Part A (RWPA) grant

- **40,178** unduplicated clients were reported by our grant sub-recipients for Ryan White Parts B, C & D contracts. Of these, roughly half, or **20,257** clients, were reported under Part A.
RSR Data Completeness 2012-2017

Cascading table showing percentage of Providers with less than 90% completeness for HIV/AIDS Bureau (HAB)’s six targeted data elements:
NY EMA: Optimizing the RSR Process

- Use an RSR-ready system for data collection and monitoring
- Use available tools to enhance the reporting process
- Monitor completeness and quality of data using RSR Reports and e-mail communications
- Provide up to date information to grant sub-recipients on RSR changes and policies
- Collaborate with other RW funding Parts
- Maintain a working relationship with HRSA’s technical support teams
Timeline for RSR Preparations

1. Identify contracts to be included in the RSR
2. Conduct RSR Preparation webinars
3. Coordinate eligible scope reporting
4. Arrange conference calls with sub-recipients
5. Survey sub-recipients for RSR contacts
6. Send data quality emails to sub-recipients
7. Conduct RSR Instructional webinars
The NY EMA eSHARE System

- The NY EMA uses eSHARE (Electronic System for HIV/AIDS Reporting and Evaluation), a certified RSR-ready system, to collect and report RSR data.
  - eSHARE includes an RSR validations report to check for missing data
  - eSHARE produces an .XML file of RSR-ready data
  - eSHARE can be modified to accommodate changes to reporting requirements
Tools Used in the RSR Process

- **eSHARE** – data collection system for RSR data, also creates XML file
- **Zendesk** – e-mail ticketing system – collaboration with New York State Department of Health
- **TRAX** – HRSA program to create customized XML files of RSR data
- **Check Your XML** – feature in the HAB RSR Web application to upload test files
- **SurveyMonkey** – survey program to solicit feedback on RSR process
- **Skype for Business** – for webinars on RSR, both before and after RSR submission
How the NY EMA Makes Use of Available Tools

- Enter data into eSHARE
- Use RSR Validations Reports to fill gaps/make corrections

- Use Check Your XML to test client-level data files
- Use TRAX to ‘tweak’ some files for service category designation

- Use SurveyMonkey to solicit feedback on RSR process
- Use dedicated email account to send completed reports to funded agencies

- Use Skype for Business to conduct RSR webinars
- Use Zendesk * to coordinate with NYS for eligible reporting scope

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*ZenDesk is a web-based email ticketing system which allows agents to share accounts
Links to RSR documents are available to sub-recipients on the eSHARE Dashboard and include step-by-step instructions to create the RSR Provider and Client Report.

A Frequently Asked Questions (FAQs) document includes information for sub-recipients on how to report under multiple funding streams.
The RSR Report

The RSR Validations Report uses HRSA RSR validations to identify client records in eSHARE that have missing or ‘unknown’ values for RSR data elements.
ZenDesk Email Platform

ZenDesk is a Help Desk Email platform which allows multiple agents to respond to queries from RSR grant sub-recipients.

Since approximately one third Part B funded agencies in the NY EMA also have Part A funding, this platform facilitates coordinated RSR messaging to agencies.

ATTENTION: This email came from an external source. Do not open attachments or click on links from unknown senders or unexpected emails. If it looks suspicious, send it as an attachment to spamemail@health.nyc.gov

You are registered as a CC on this support request (872). Reply to this email to add a comment to the request.

Hi. Thanks for submitting your RSR Extract, However, we noticed that your Part B Funded Service categories are being excluded. We are looking determine what the correct funding should be for your 'Housing LGBT' program. We should have this sorted out tomorrow so we'll wait on return your RSR Completeness Reports until then. We'll be in touch.
The TRAX Application from HRSA

The TRAX application is a free downloadable program from HRSA, which uses Excel spreadsheet templates of RSR data to create an RSR-ready XML file.

The NY EMA uses TRAX in cases where service categories need to be manually adjusted for the RSR.
This feature allows grant recipients and sub-recipients to upload a test file of client-level data to check for quality and completeness using an Upload Completeness Report.
Recipient/Sub-Recipient Support

- Identify two RSR contacts at each funded organization
- Hold RSR Preparation and Instructional Webinars
- Disseminate provider-level spreadsheets with data issues including:
  - HIV diagnosis year
  - Household income
  - Enrollment issues
- Communicate using an e-mail account specifically for RSR issues: (eshareRSR@health.nyc.gov – ‘eSHARE Data Review’)
- Conduct conference calls to discuss reporting issues and clinical data
Why Collaboration with other Funding Parts?

• ‘Treat’ the ‘Whole’ RSR!

• Benchmarks include ALL funding Parts

• Eligible scope of services requires collaboration

• Allows for sharing of best practices

• Facilitates consistency of reported data
The NY EMA’S RSR

Lots of Moving Parts!

HRSA

- Part C Grantee
- NYC DOHMH
  - Part A Grantee
  - Part A Sub-Recipient
- NYS AIDS Institute
  - Part B Grantee
  - Part B Sub-Recipient
- Part D Grantee
NY EMA and HRSA Technical Support

- Submit formal comments through the Federal Register on proposed RSR changes and data collection practices
- Assist technical assistance teams with testing of website updates
- Provide feedback on RSR process to technical assistance teams on an annual basis
- Seek clarification on RSR data collection policies to communicate to sub-grantees
- Participate in all RSR webinars in order to keep abreast of RSR changes
NY EMA and RSR Feedback

- **Communicate RSR results** to grant recipients/sub-recipients
  - RSR Handout with aggregate data/completeness rates
  - Official feedback from RW Data TA team on benchmarks
- **Follow-Up Webinar** to present RSR results and go over process
- **Send RSR report packages** to grant recipients/sub-recipients
- **Survey recipients/sub-recipients** on RSR process and make adjustments to process accordingly
Communicate regularly with grant recipients and sub-recipients

Utilize tools at your disposal

Keep up to date on RSR changes

Collaborate with other funding parts

Ensure your data collection system is RSR-ready

Important Takeaways
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Questions or Comments?

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