

Closing the gap in HIV Care Continuum - Automation of Electronic Laboratory Reports (ELR) Linkage to Improve Clinical Performance Measures

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Key Objectives:

- Discuss an automated process to improve HIV care linkage and retention measures
- Share health department successes and challenges in developing automated linkage processes of ELR to improve the clinical performance measure through probabilistic matching of patients' incoming lab to current events (This is not the same as laboratory maintenance of HIV patients or eHARS).
- Identify CSTE members interested in the improvement of HIV Continuum to care measures with integrated disease surveillance system, ELR and other data sources for possible future collaborations or discussions

Brief Summary:

Southern Nevada Health District (SNHD) developed an automated retention in care process through ELR integration and other data sources to provide a better picture of the HIV care continuum in Clark County. The process provides a timely electronic monitoring of People Living with HIV/AIDS (PLWHA) enrolled in access to care and follows them to retention in care as defined by the Health Resources and Services Administration (HRSA) (3-6 months from first medical appointment). This feature reduces public health department staff workload on tracking, focus on providing service to clients, improves the performance measure with accurate documentation and catches clients falling out-of-care early enough to re-engage them back to care.