# PCSI In Action Not Inaction: Update from the PCSI Demonstration Projects

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CHPP for HD Grantee Orientation Meeting March 27, 2012

No conflicts of interest



#### **Overview of Discussion**

- What is PCSI and why is it important
- Overview of the PCSI demonstration projects
- Progress made and lessons observed
- Tools and by products

# WHAT IS PCSI AND WHY IS IT IMPORTANT?

#### What is PCSI?

# Program Collaboration and Service Integration (PCSI)

 A structural intervention to improve synergies between prevention programs and to provide more holistic integrated services to clients

## Why is PCSI Important?

#### **The Changing Health System Landscape**

- □ Funders are demanding rigorous evidence that investments in interventions improve health outcomes
- Public health programs are being asked to maximize efficiencies based on most cost-effective, highest impact and feasible approaches
- Public health programs are being asked to develop a business case for investment
- Declining public health infrastructure
- Competing priorities

# OVERVIEW OF THE PCSI DEMONSTRATION PROJECTS

#### **PCSI Goals**

- □ To create system-level/structural changes that
  - Increase collaboration across HD programs
  - Streamline activities and decrease the duplication of efforts across HD programs
  - Increase the delivery of integrated services
- By creating
  - Forums for collaboration
  - Mechanisms that facilitate data sharing
  - Resources, tools and strategies that facilitate the integrated service deliver

#### **PCSI Structures**

- PCSI Team
  - Champions at high level HD
  - Staff: coordinator and data analy
- PCSI Committees and Workgroups
  - Steering Committee
  - Data Advisory Committee
  - Training/Outreach Workgroup
  - Community Advisory Committee
- PCSI Partners/Stakeholders
  - Internal
  - External

## **NYC Internal Partners**

- Bureau of Maternal, Infant and Reproductive Health
- District Public Health Offices
- Division of Health Planning/HCAI
- Division of Informatics and Information Technology (DIIT)
- Bureau of Correctional Health
- Bureau of Drug and Alcohol Prevention, Care and Treatment
- Bureau of Epidemiology Services
- Primary Care Information Project





#### **NYC External Partners**

- Federally Qualified Health Centers (FQHCs)
- Syringe Exchange Programs (SEPs)
- Community Task Forces and Coalitions
- NYS Department of Health (NYS AIDS Institute)
- Mayor's Office of Immigrant Affairs
- NYC Department of Homeless Services
- Harm Reduction Coalition (HRC)





#### **PCSI Activities**

- PCSI program collaborations
  - Leveraging others and other resources
- PCSI registry matching
  - Co-infections
  - Temporal relationships to identify risk groups
  - Geocoding of syndemics
- Environmental scan of guidelines, practices, policies and laws

#### **PCSI Activities**

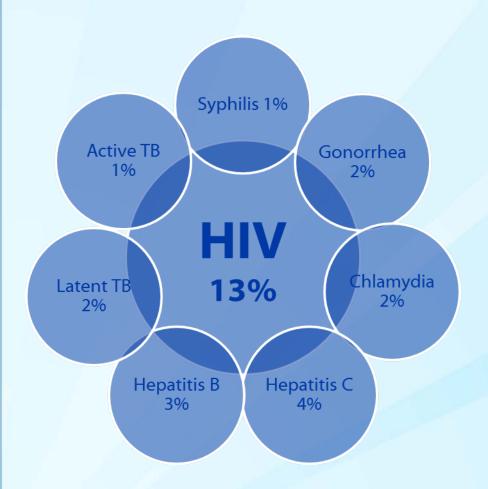
- PCSI health care assessments
  - STD, TB and HCV screening and HBV vaccination in HIV care settings
  - HIV and HCV screening and HBV vaccination in STD clinics
  - HIV and HCV screening and HBV vaccination in TB clinics
  - HIV, STD, TB and HCV screening and HBV vaccination in primary care clinics, drug treatment, LGBT health centers, HIV prevention programs, prenatal, correctional settings
- Design interventions to increase collaboration and service integration
  - Billing for services
  - IT solutions
  - Legislative changes

#### **PCSI Activities**

- PCSI Evaluation
  - Mixed methods model
    - Qualitative and quantitative data collection
    - Participatory evaluation model
  - Logic model
  - Evaluation matrix
  - Sample service integration indicators
  - Collaboration assessment rubric

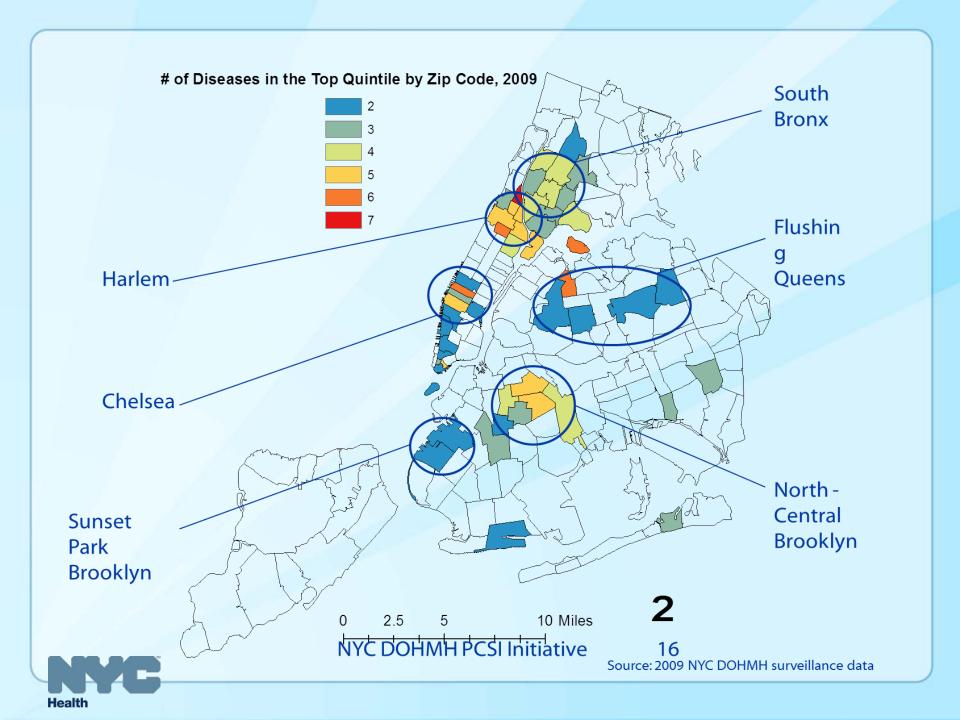
# PROGRESS MADE AND LESSONS OBSERVED

#### **Visualizing Syndemics**



- Based on registry matches, the extent of patient-based overlap between diseases of interest can be directly assessed
- Identifying populations at risk for multiple diseases is critical for integrating preventive services at the point of care

Diagram Courtesy of Israel Nieves-Rivera, PCSI Manager, Priscilla Lee Chu, DrPH, MPH, PCSI Analyst, Population Health and Promotion, San Francisco Department of Public Health



#### **Lessons Observed**

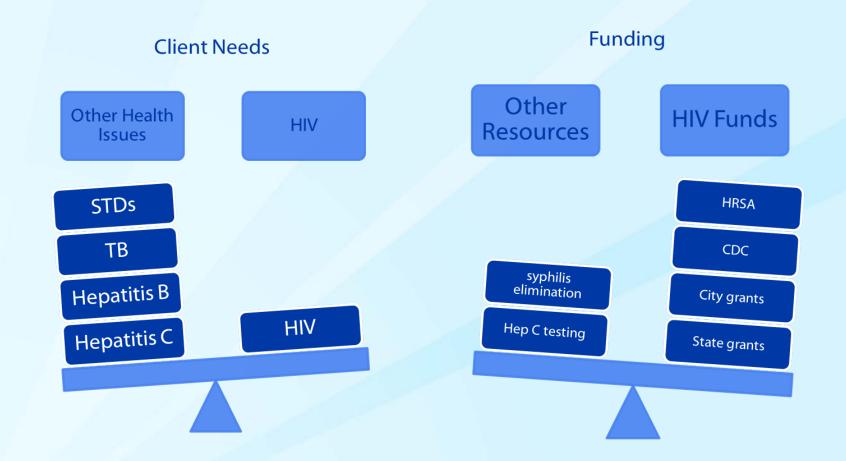
- More effective structure may be when champion is at a high level and PCSI coordinators are not embedded in one of the PCIS programs
- Data sharing can happen if leadership
  - Many have migrated all data into one HD system
  - IT is a big challenge
- □ Temporal relationship of infections are important in addition to identifying syndemics

#### **Lessons Observed**

- Extra-genital screening for GC/CT in gay or other MSM is uncommon
- Population- based health services assessments and safety net gap analyses are uncommon in HD
- Service integration will not scale up if only federal grants are used
  - Billing third party payers is a PCSI goal
  - Use federal grants for most vulnerable populations by reprioritizing low impact screening activities

"This PCSI grant is significantly changing the way our HD operates for the better and we initially were not intending to apply because \$350,000 did seem worth the effort"

# **NYC Status: CBO Service Integration**



NYC DOHMH PCSI Initiative





## **PCSI Tools and By Products**

- PCSI Assessment and Planning Tool
- Data matching algorithms and geocoding toolkit
- Integrated screening recommendations by populations for providers
- Summary of PCSI billing codes for providers
- Evaluation Planning Tools

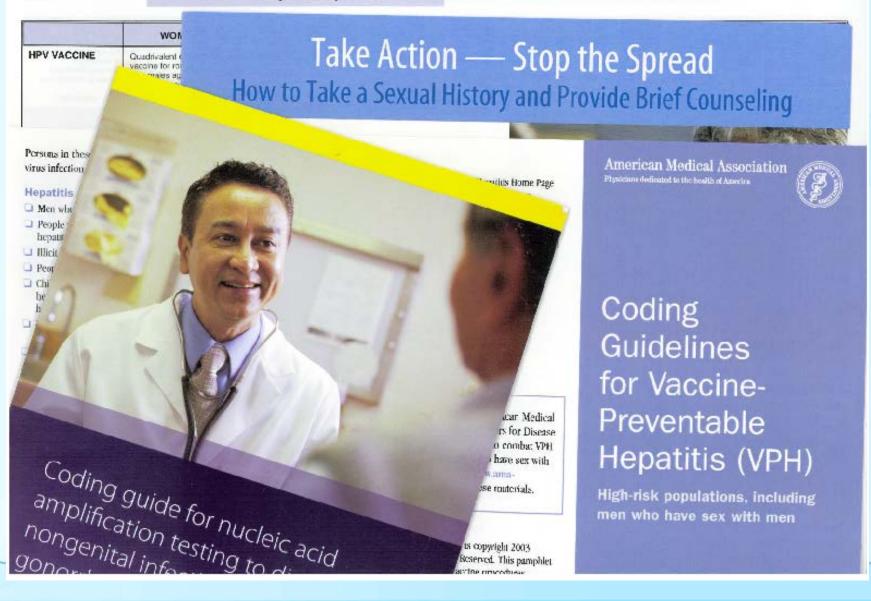


#### Take Action - Stop the Spread STI VACCINATION GUIDELINES

For sexually active patients

Most of the recommendations in this document are derived from the 2010 CDC Sexually Transmitted Diseases Treatment Guidelines unless otherwise noted.

Abbreviations used: MSM=mon who have sex with mon; WSW=women who have sex with women; FLWHA = persons Iving with HfV and AlbS; CT=Chlamydia trachomatis; OC=Neisser's gonomies. HPV-I luman Papillomavirus: BV-Bacterial Vaginosis; PAI - Repositive Ana Intercourse.



Reserved. This pamphlet

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#### Thank you!

Questions?

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