

HAB HIV Core Clinical Performance Measures: Adult/Adolescent Clients Group 2



Performance Measure: Syphilis Screening		OPR-Related Measure: Yes www.hrsa.gov/performance/measure.htm																					
Percentage of adult clients with HIV infection who had a test for syphilis performed within the measurement year																							
Numerator:	Number of HIV-infected clients who had a serologic test for syphilis performed at least once during the measurement year																						
Denominator:	Number of HIV-infected clients who: <ul style="list-style-type: none"> were ≥ 18 years old in the measurement year¹ or had a history of sexual activity < 18 years, and had a medical visit with a provider with prescribing privileges² at least once in the measurement year 																						
Patient Exclusions:	1. Patients who were < 18 years old and denied a history of sexual activity																						
Data Element:	1. Is the client HIV-infected? (Y/N) <ul style="list-style-type: none"> a. If yes, is the client ≥ 18 years or reports having a history of sexual activity? (Y/N) <ul style="list-style-type: none"> 1. If yes, was the client screened for syphilis during the measurement year? 																						
Data Sources:	<ul style="list-style-type: none"> Ryan White Program Data Report , Section 5, Items 42 and 48 may provide data useful in establishing a baseline for this performance measure Electronic Medical Record/Electronic Health Record CAREWare, Lab Tracker, or other electronic data base HIVQUAL reports on this measure for grantee under review Medical record data abstraction by grantee of a sample of records 																						
National Goals, Targets, or Benchmarks for Comparison	IHI Goal: 90% ³ National HIVQUAL Data: ⁴ <table border="1" style="width: 100%; text-align: center;"> <thead> <tr> <th></th> <th>2003</th> <th>2004</th> <th>2005</th> <th>2006</th> </tr> </thead> <tbody> <tr> <td>Top 10%</td> <td>99.0%</td> <td>100%</td> <td>100%</td> <td>100%</td> </tr> <tr> <td>Top 25%</td> <td>90.4%</td> <td>92.2%</td> <td>95.7%</td> <td>95.6%</td> </tr> <tr> <td>Mean*</td> <td>73.7%</td> <td>78.5%</td> <td>82.1%</td> <td>80.0%</td> </tr> </tbody> </table> <small>*from HAB data base</small>				2003	2004	2005	2006	Top 10%	99.0%	100%	100%	100%	Top 25%	90.4%	92.2%	95.7%	95.6%	Mean*	73.7%	78.5%	82.1%	80.0%
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Outcome Measures for Consideration	<ul style="list-style-type: none"> Incidence of neurosyphilis in the clinic population 																						
Basis for Selection and Placement in Group 2:																							
HIV-1 infection appears to alter the diagnosis, natural history, management, and outcome of <i>T. pallidum</i> infection.																							
Measure reflects important aspect of care that impacts HIV-related morbidity and focuses on treatment decisions that affect a sizable population. Measure has a strong evidence base supporting the use.																							

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US Public Health Guidelines:

“HIV-infected patients should be screened for behaviors associated with HIV transmission by using a straightforward, nonjudgmental approach. This should be done at the initial visit and subsequent routine visits or periodically, as the clinician feels necessary, but at a minimum of yearly. Any indication of risky behavior should prompt a more thorough assessment of HIV transmission risks. Screening for STDs should be repeated periodically (i.e., at least annually) if the patient is sexually active or if earlier screening revealed STDs. Screening should be done more frequently (e.g., at 3–6-month intervals) for asymptomatic persons at higher risk.⁵ (7/18/03)

References/Notes:

¹ Onset of sexual activity is not reliably reported or recorded. The lower age bracket of 18 years is selected for performance measurement purposes only and should not be interpreted as a recommendation about the age at which screening should begin to occur.

² A “provider with prescribing privileges” is a health care professional who is certified in their jurisdiction to prescribe ARV therapy.

³ IHI Measure reads, “Percent of Patients with Annual Syphilis Screen”

(<http://www.ihl.org/IHI/Topics/HIVAIDS/HIVDiseaseGeneral/Measures/PercentofPatientswithAnnualSyphilisScreen.htm>)

⁴ (http://www.hivguidelines.org/public_html/center/quality-of-care/hivqual-project/hivqual-workshop/03-04-natl-score-top10-25.pdf)

⁵ Centers for Disease Control and Prevention. Incorporating HIV prevention into the medical care of persons living with HIV: recommendations of CDC, the Health Resources and Services Administration, the National Institutes of Health, and the HIV Medicine Association of the Infectious Diseases Society of America. MMWR 2003;52 (No. RR-12) (http://aidsinfo.nih.gov/ContentFiles/HIVPreventionInMedCare_TB.pdf or http://aidsinfo.nih.gov/ContentFiles/HIVPreventionInMedCare_TB.pdf)