

# City of Paterson: A Case Study in Innovation

HRSA SPNS

Washington, DC  
November 28, 2012

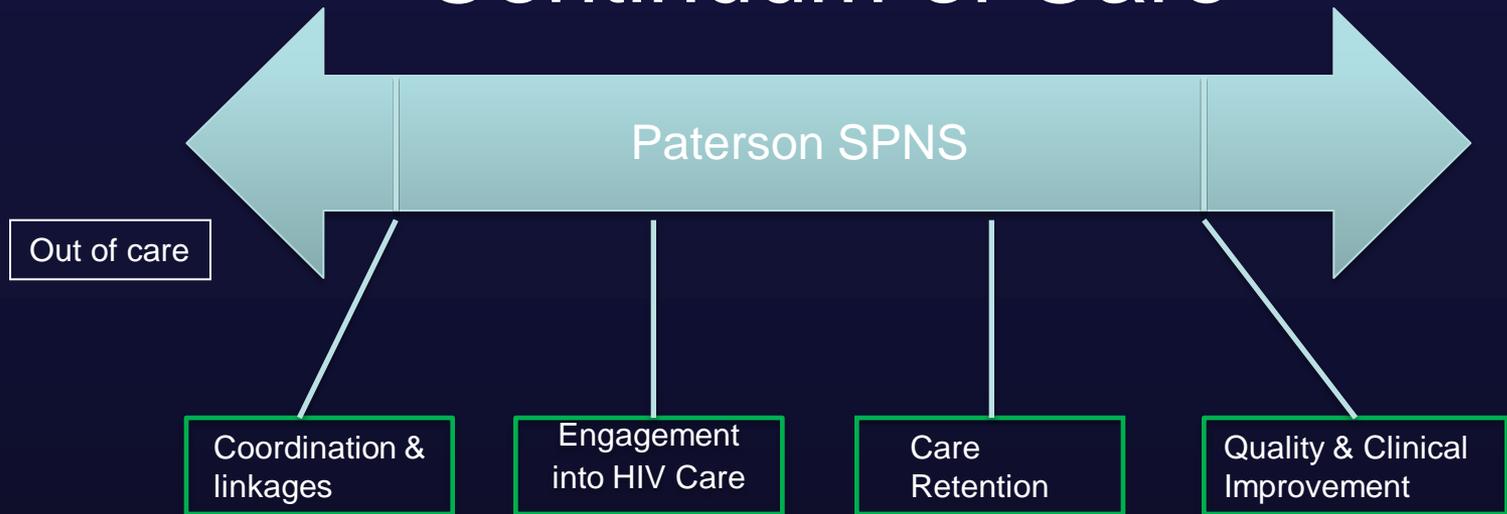
Facilitated by:

Jesse Thomas  
Patricia Virga, PhD



*City of Paterson*

# Continuum of Care



## Goals

- **Strengthen the management and exchange of patient health information.**
- **To promote provider self-monitoring via the e2 system in order to improve patient outcomes as measured by quality of care and patient satisfaction.**

# The Team



HRSA HAB SPNS



City of Paterson RW Part A



RDE Systems, LLC

Technology Partner



New Solutions, Inc

Principal Investigator



St. Mary's Hospital



HUMC

**PCC**

Paterson Counseling



Paterson Testing

Non-SPNS Providers



Bergen County Testing



(from left to right) Denise Coba, Pat Virga, Jesse Thomas, Millie Izquierdo, Jimease Green, Maria Cordova, Doug Mendez, Pricilla Moschella, Jerry Dillard, Ellen McNamara, Larry Rodgers, Blanca Roman, Anthony Fazzinga, Sandra Murillo, Maryann Collins, Irene Panagiotis, Serge Virodov, Chantia Douglas, Kathy Lebron

A journey together...

So what happened over the past  
five years?

# Highlights of Our Story Today:

- Three Technical Interventions and Their Results
- Advance Screening of an Upcoming Intervention
- A Story of Collaboration

# Intervention Platform

## The Technology

- ❖ Fully web-based, user-friendly eCOMPAS system
- ❖ Interactive Visual Analytics
- ❖ Clinical Module
- ❖ Proactive Alerts and Reminders System
- ❖ Quality Improvement Modules (NQC CPC, Clinical, PDSA)
- ❖ System Linkages Module with HIV Testing
- ❖ Retention Module

Intervention 1:

Web-Based Health Information  
Exchange

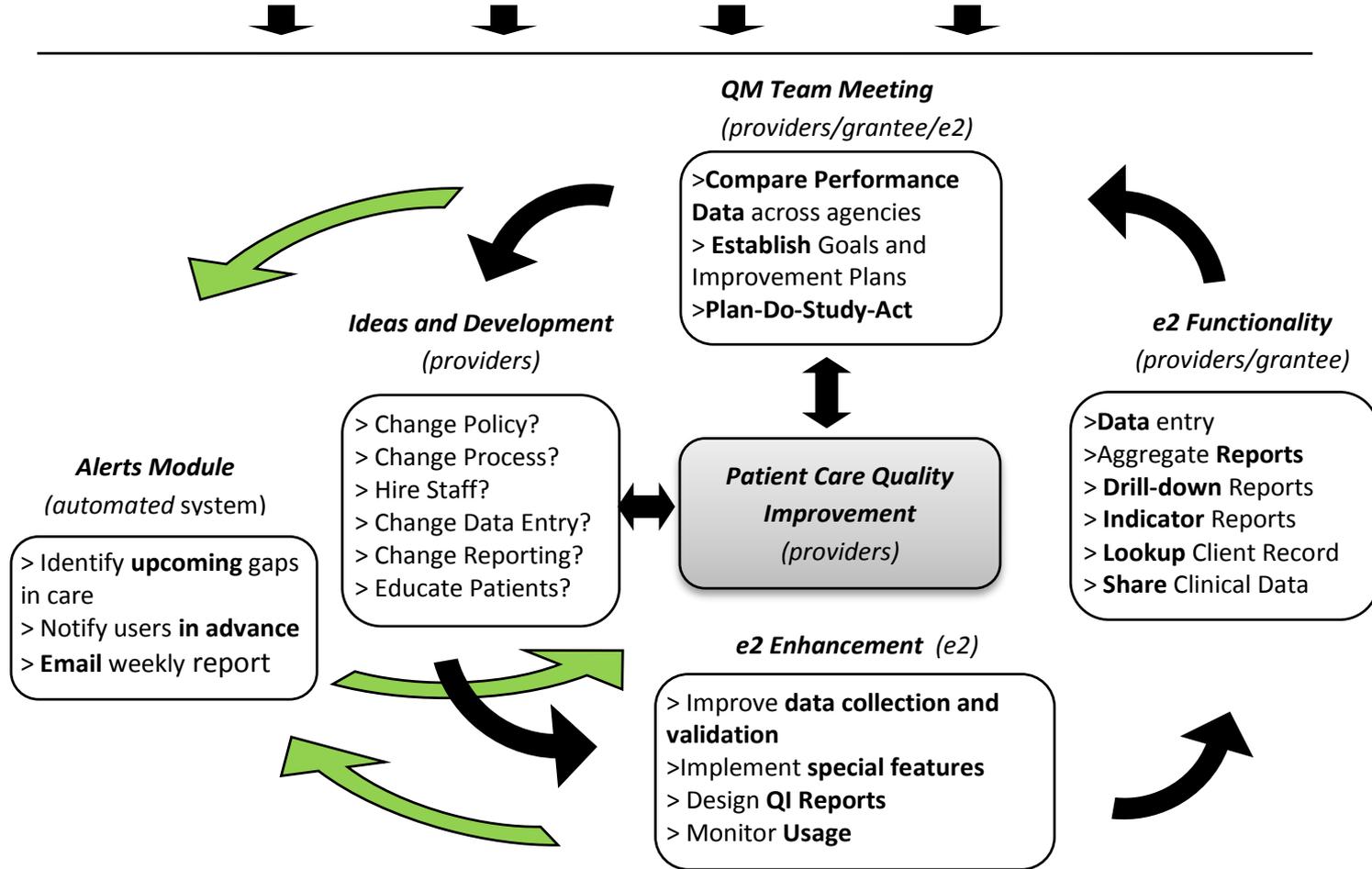


Electronic Comprehensive Outcomes Measurement Program  
for Accountability and ***Success (e2)***

Developed by  
RDE Systems, LLC

A System AND an Approach

## Collaborative Exchange of Information – An Iterative Logic Model



**58,724**

logins occurred in eCOMPAS

**372,310**

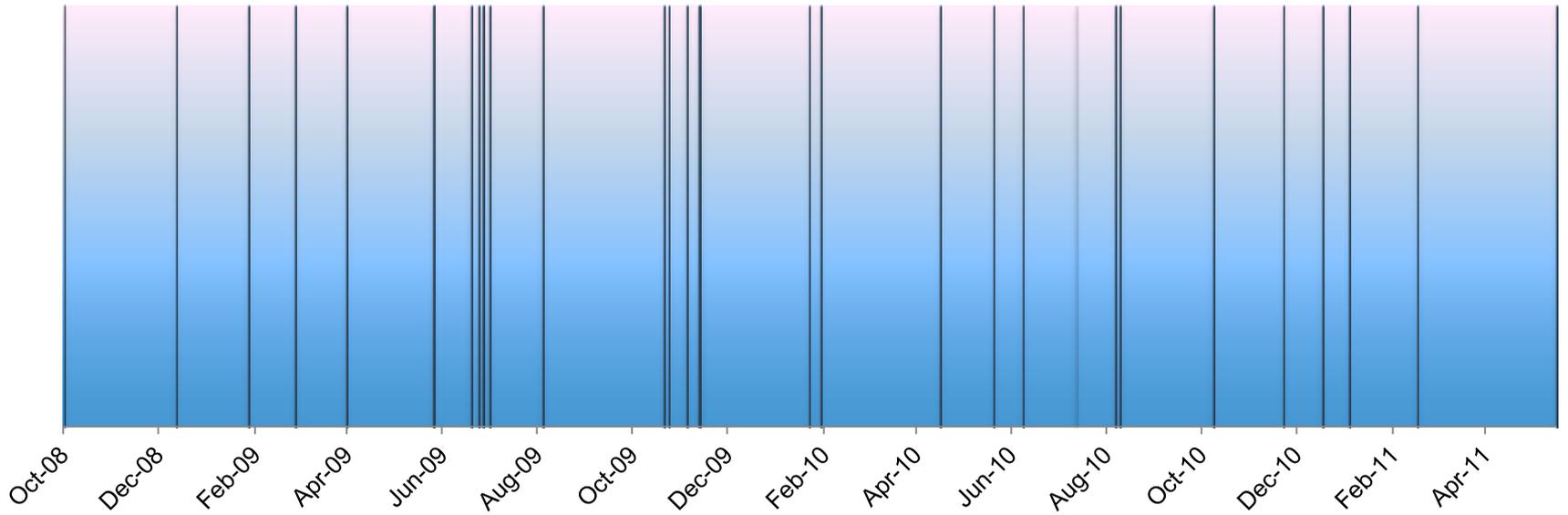
services recorded in eCOMPAS

**2,350,000**

data values recorded in eCOMPAS  
for SPNS!

Continuous system enhancement excites end-users and calibrates how needs are fulfilled.

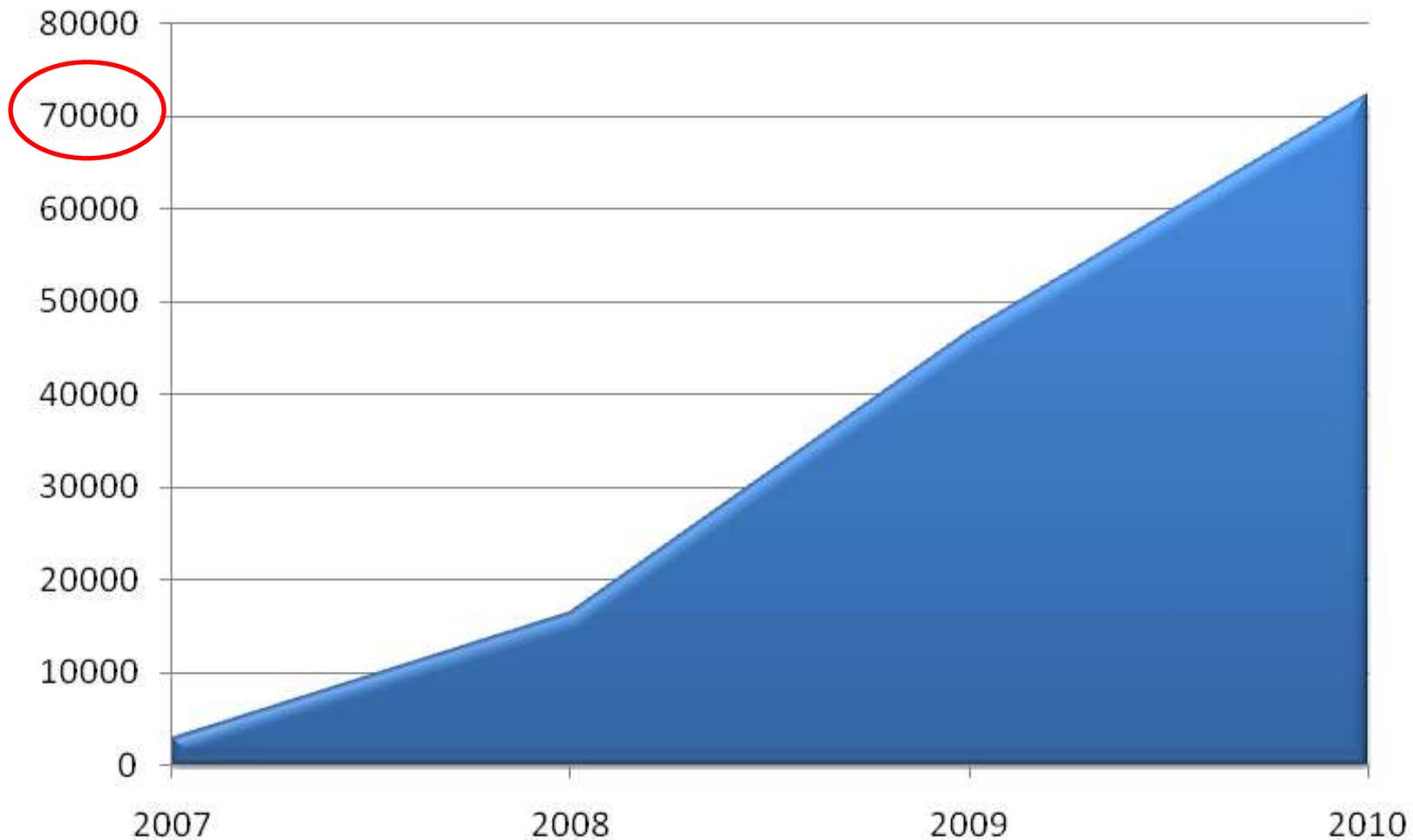
### System Launches



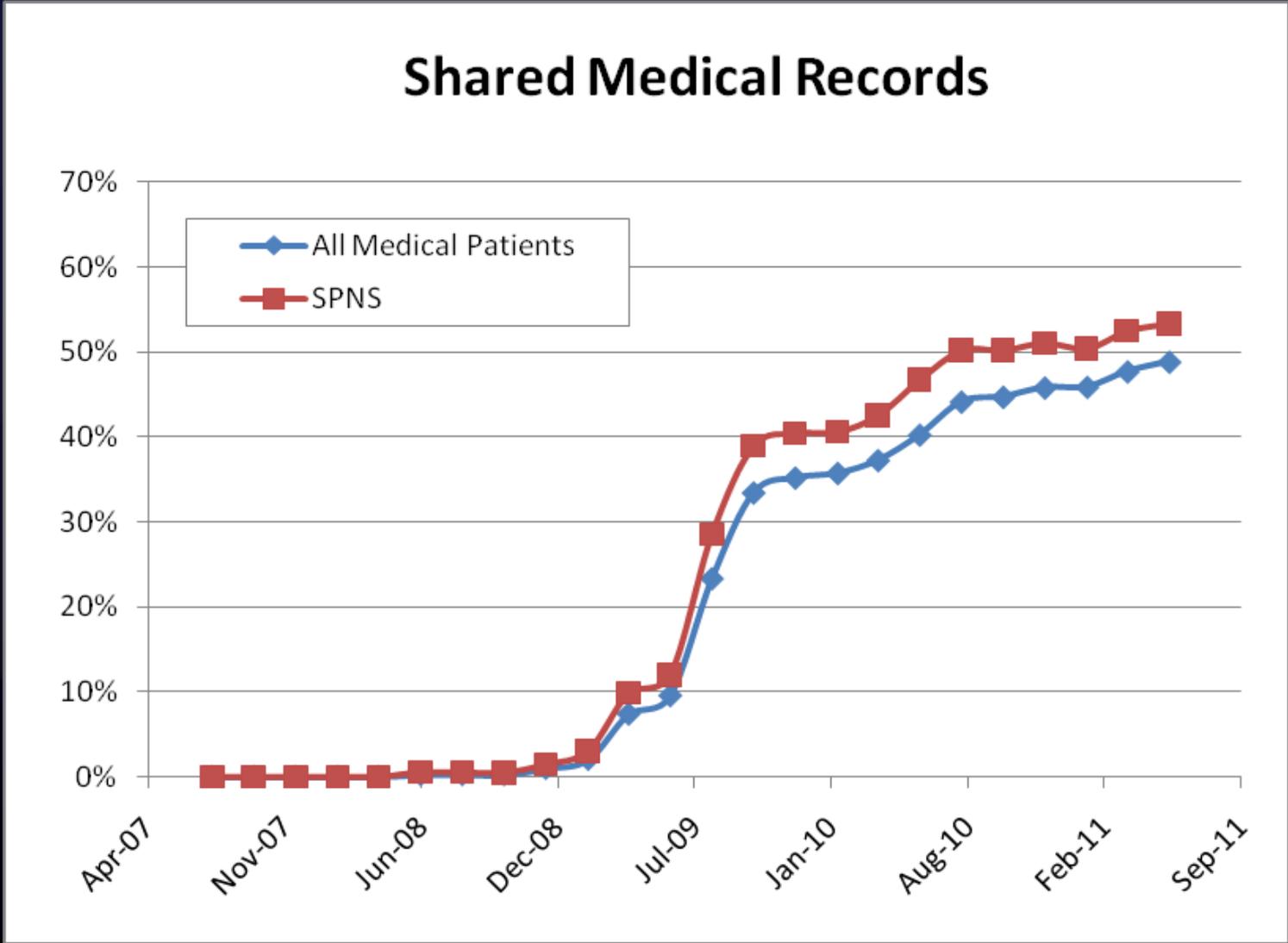
**One new launch per month**  
On average for 32 months

# Medical Information Access:

Number of Times SPNS Client Medical Information Screen Was Accessed (cumulative)



# More Medical Record Sharing Occurring with SPNS Patients



# Importance and Impact of Data Sharing

# Intervention 2:

Interactive Visual Reports in  
eCOMPAS

and

The Bergen-Passaic  
Peer Learning Network

# Intervention Approach

Process over Product:  
The eCOMPAS Approach

# A Simple, Integrated Framework for HIT Implementation



# eCOMPAS Interactive Quality Reporting

**Cross Collaborative Report**

From Date:  To Date:  or Select:

1) % of Ryan White HIV/AIDS clients with 2 CD4 tests in a year	
1. Clients eligible for indicator	142 (List)
2. Clients who are in this indicator	106 (List)
3. Clients who are not in this indicator	36 (List)
<b>Indicator Percentage</b>	<b>74.6%</b>

2) % AIDS clients who are prescribed HAART	
1. Clients eligible for indicator	79 (List)
2. Clients who are in this indicator	65 (List)
3. Clients who are not in this indicator	14 (List)
<b>Indicator Percentage</b>	<b>82.3%</b>

[Close]

RPG80782

TOY765284

HFP234936

WHF645308

UIG734935

QEX657147

PWJ51285

WHY245167

DIY532548

RPH872456

EOK982657

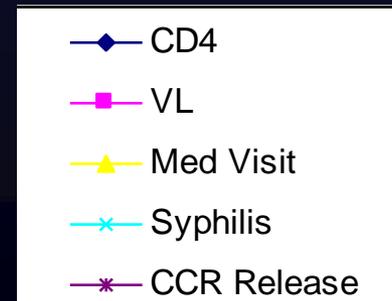
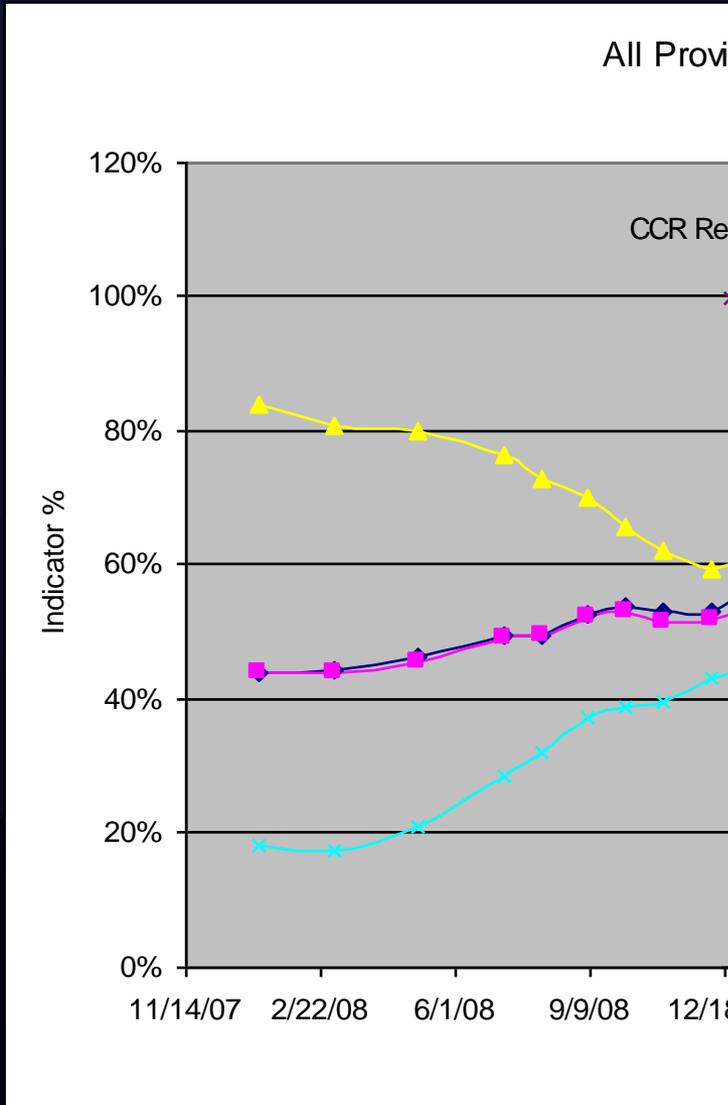
1. User clicks on the number of clients NOT in the numerator.

2. A list of clients pops up.

3. Staff drill-down to each client record and use it as a tool for follow-up.

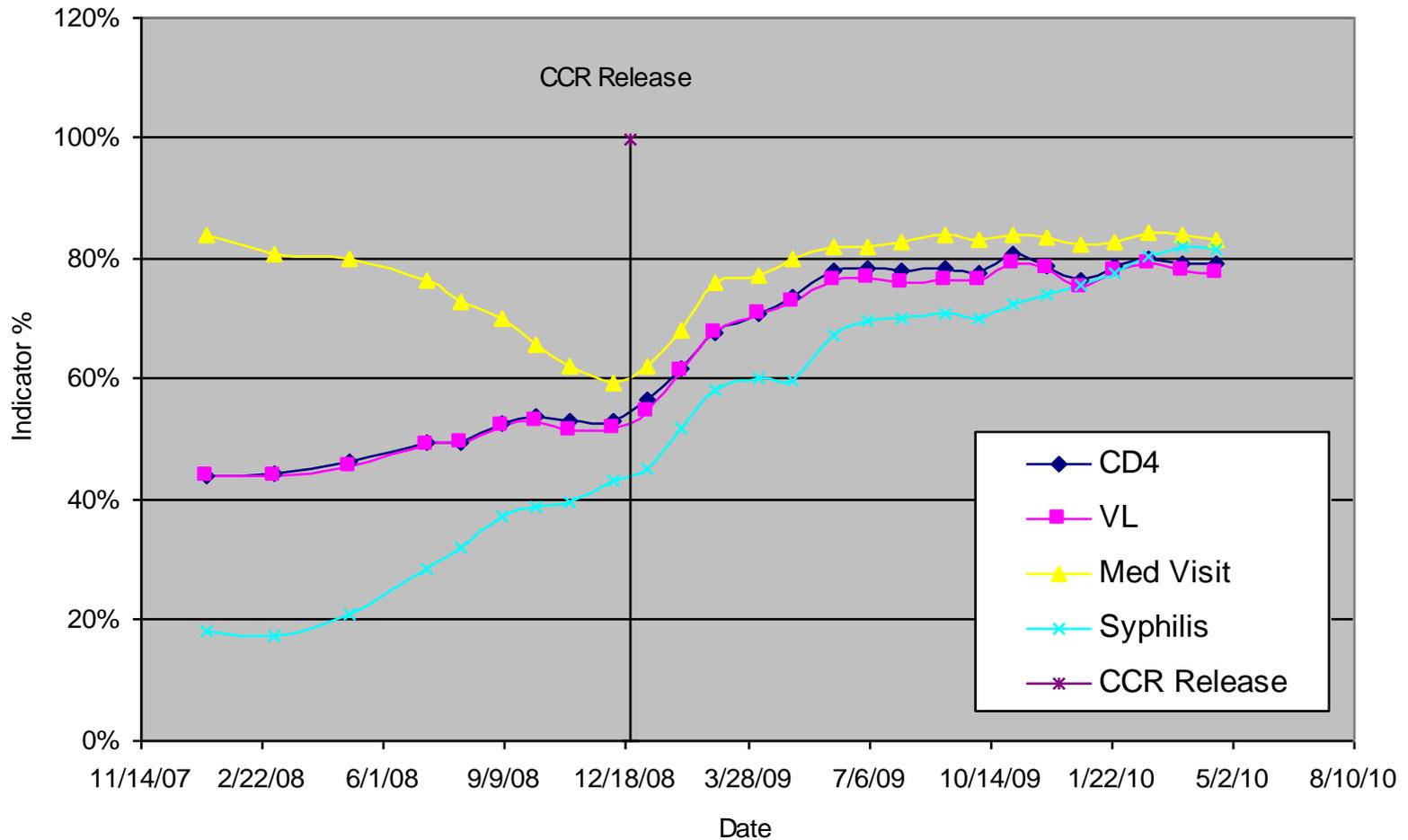
# Outcomes

# Cross Part Collaborative Indicators

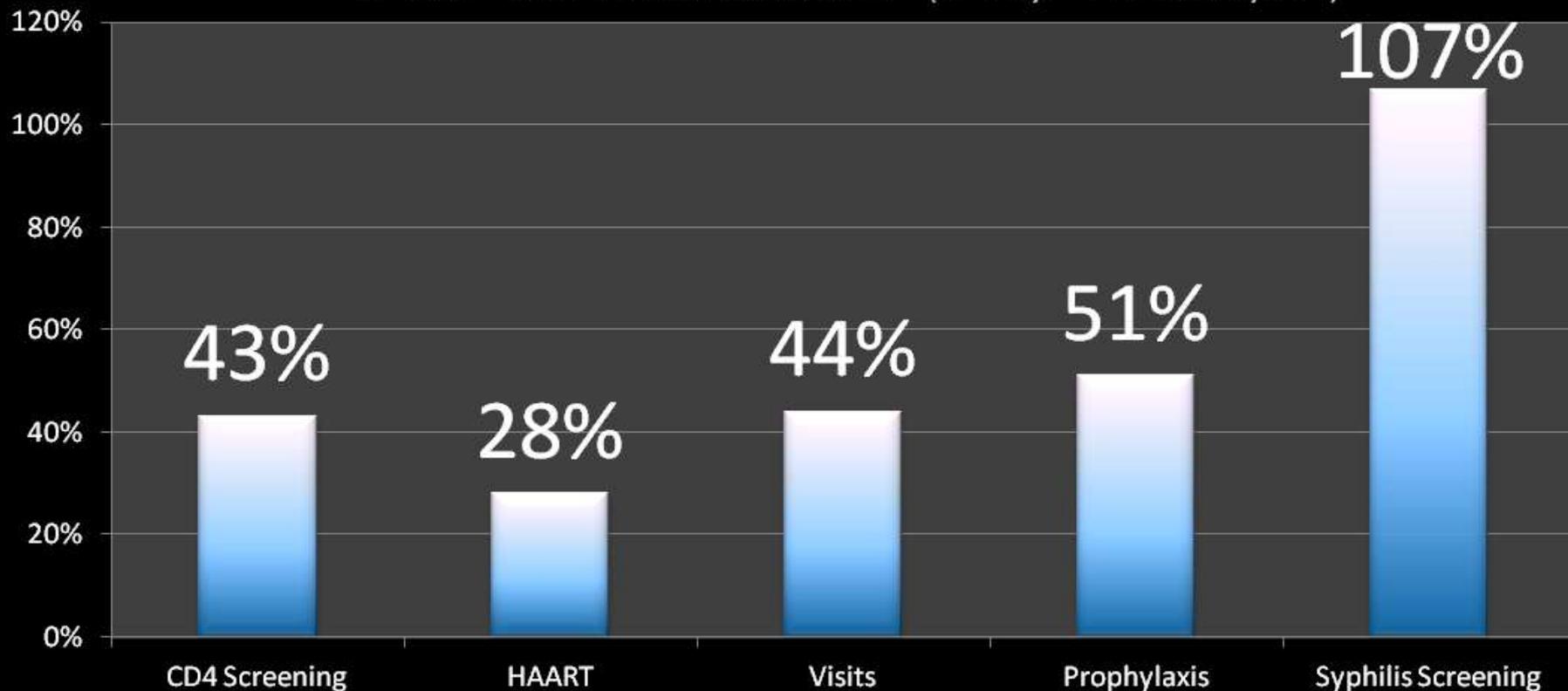


# Cross Part Collaborative Indicators

All Providers - By Indicator



## Bergen-Passaic Indicators Improvement Cross Part Collaborative (2009 cycle 2 to 2012 cycle 4)



# Comparative Benchmarks Spur Healthy Competition

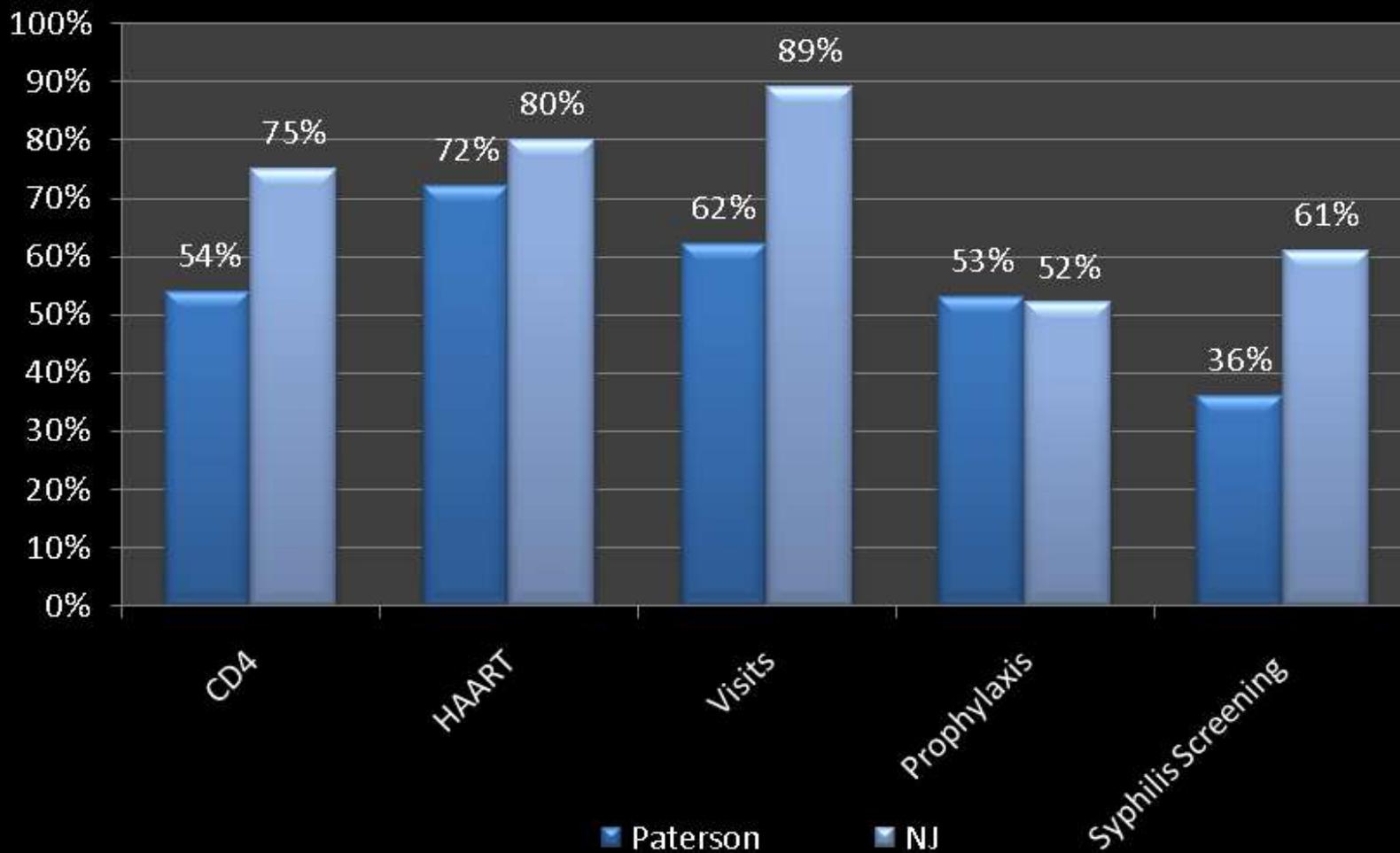
## Cross Collaborative Report

From Date:  To Date:  or Select:  

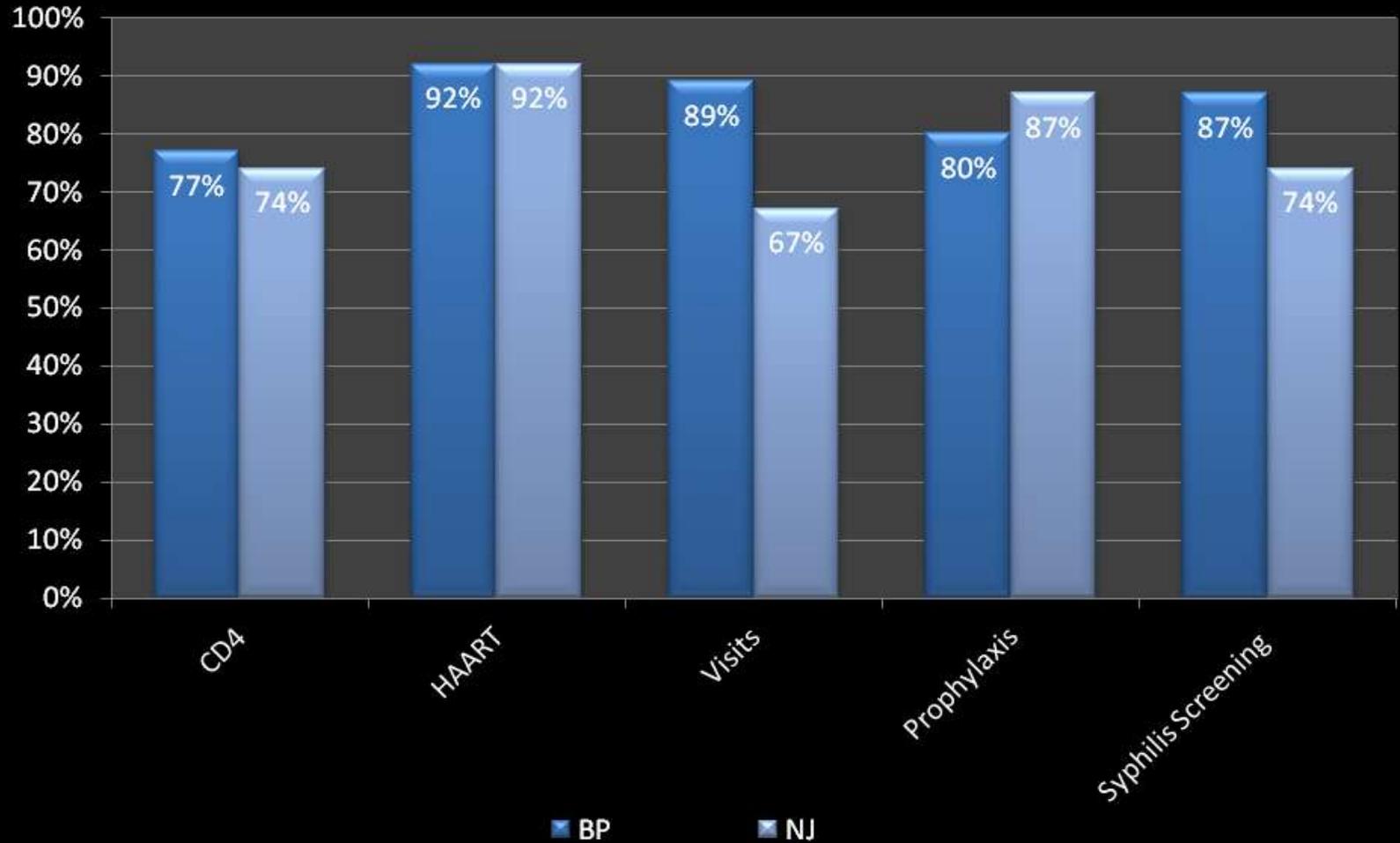
1) % of Ryan White HIV/AIDS clients with 2 CD4 tests in a year <span style="float: right;">[?]</span>	
1. Clients eligible for indicator	88 <a href="#">(List)</a>
2. Clients who are in this indicator	64 <a href="#">(List)</a>
3. Clients who are not in this indicator	24 <a href="#">(List)</a>
<b>Indicator Percentage</b>	<b>72.7%</b>
<b>State of New Jersey Average Indicator Percentage</b>	<b>75.4%</b>

# How did Paterson compare to the State?

(2009 Cycle 2)



## How does Bergen-Passaic compare to the State **now**? (2012 Cycle 4)



# Statewide Recognition of Bergen-Passaic Providers

## New Jersey's success in the In+Care Campaign

Jane Caruso, M.S., Ryan White Part D Project Director,  
New Jersey Department of Health

The Health Resources and Services Administration together with the National Quality Center have teamed up on a national retention campaign referred to as the In+Care Campaign. The In+Care Campaign aims to keep patients in care — if patients stay in care, they get the services that they need to stay healthy. The In+Care Campaign includes 484 providers nationally who currently manage the care of 421,697 patients.

Forty Ryan White Cross Part Collaborative providers in the state of New Jersey have incorporated the In+Care Campaign into clinical and data collection procedures. Merging the efforts of the Cross Part Collaborative with the In+Care Campaign goals streamlines data collection and provides a statewide picture of our collective ability to respond to patient retention challenges.



New Jersey's In+Care Team, from left to right: Roseanne Marone, Michael Hager, Jean Haspel, and Jane Caruso. The Team is available to provide guidance and support in strengthening local retention activities.

**The In+Care Campaign aims to keep patients in care — if patients stay in care, they get the services they need to stay healthy.**

### Agencies in the In+Care Campaign are engaged in the following activities:

- Reporting on four uniform campaign-related measures via an already existing Ryan White online database
- Implementing improvement activities to support patient retention
- Routinely sharing updates to highlight improvement strategies and challenges
- Joining when possible, regional/local face-to-face meetings of peer In+Care participants

After five rounds of statewide data collection (10 months of data), New Jersey is performing better than the national average in the following measures (see Figure 1).

- Percentage of patients with a medical visit in the first half of the year who did NOT have a medical visit in the second half of that year ("Gap", note that for this variable, the lower the percentage, the better; hence New Jersey's 11% reflects better performance than the national average of 14%).
- The percentage of patients with a medical visit in the first quarter of a given two-year period that also had a medical visit in each of the subsequent three quarters of that two-year period ("Frequency").
- Percentage of patients that were newly enrolled in the first trimester of a given year who had a medical visit in the subsequent two trimesters of that year (new patients "New Pts").

The remaining measure is: The percentage of HIV positive patients with an undetectable viral load, or a viral load less than 200 copies ("VLS").

### New Jersey's In+Care Campaign stars

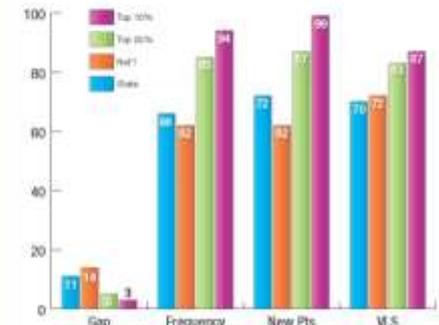
Three agencies have made outstanding progress in their rates of viral load suppression (80% or greater):

- Garden State ID at Kennedy Hospital
- Hackensack University
- St. Mary's Hospital

Seven agencies achieved a "Gap" measure under 5%:

- Jersey Shore University Medical Center Pediatrics
- Plainfield Neighborhood Health Center
- Hackensack University Medical Center
- St. Mary's Hospital
- Eric B. Chandler
- St. Joseph's Hospital and Medical Center
- Henry J. Austin

Figure 1: New Jersey In+Care Cycle 5 Data



Garden State ID at Kennedy Hospital



Hackensack University



St. Mary's Hospital

### 3 agencies have made outstanding Progress in their rates!

Efforts in New Jersey are championed by Jane Caruso from the State Department of Health, who is New Jersey's designated coach, and

- **Jean Haspel** from Atlanticare in Atlantic City in the south ([haspel@atlanticare.org](mailto:haspel@atlanticare.org))
- **Roseanne Marone** from RWJ in New Brunswick in the north ([marone@umwj.edu](mailto:marone@umwj.edu))

**Michael Hager** ([mh02@health.state.nj.us](mailto:mh02@health.state.nj.us)) from the National Quality Center is overseeing the entire national project and is a mentor and support person.

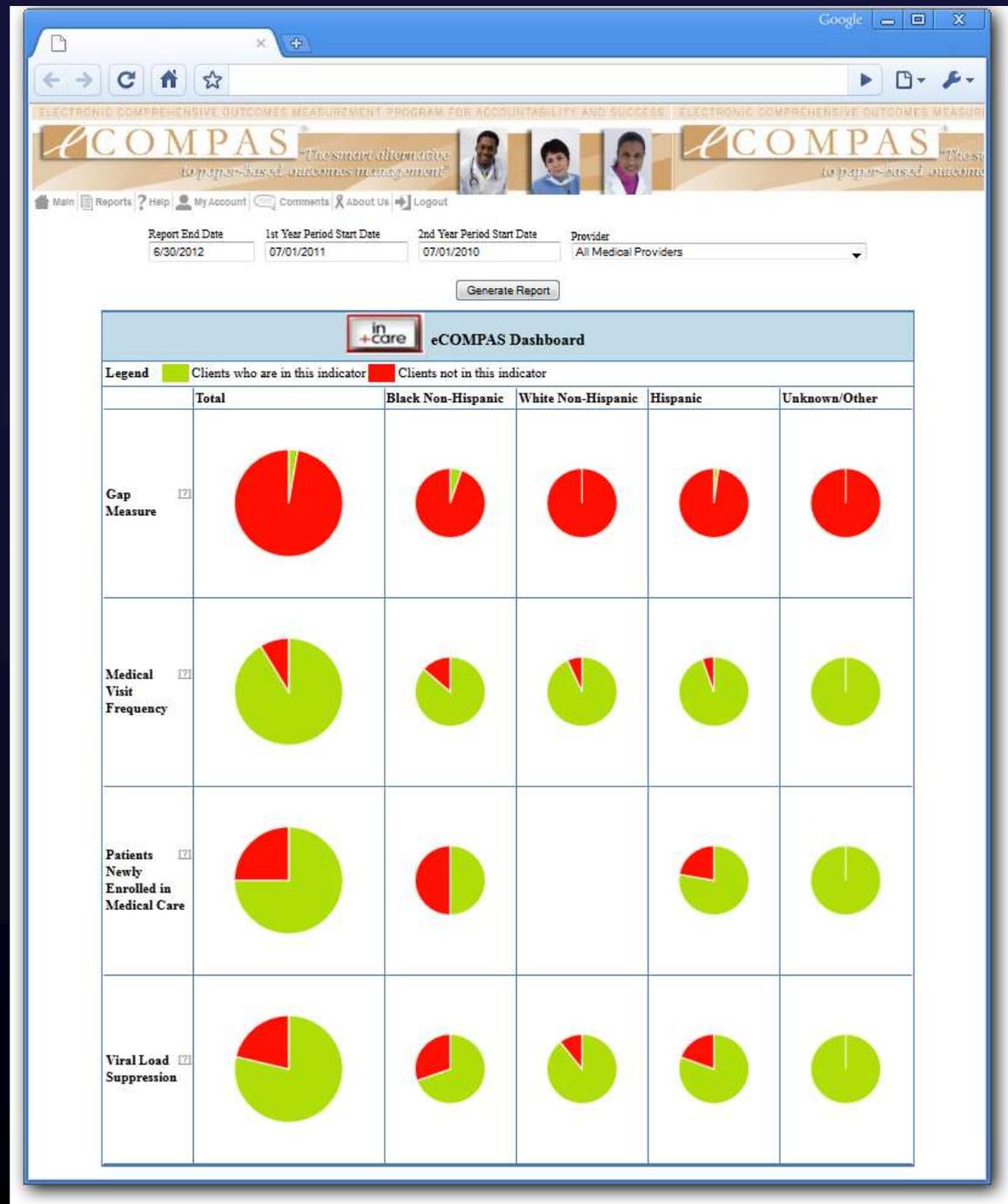
Any agency who wants guidance, support or technical assistance in developing a strategy to improve retention, should contact: **Jane Caruso** ([jane.caruso@doh.state.nj.us](mailto:jane.caruso@doh.state.nj.us)) or 609-777-7748.

Bergen-Passaic  
eCOMPAS  
SPNS Agencies

# Launching Now:

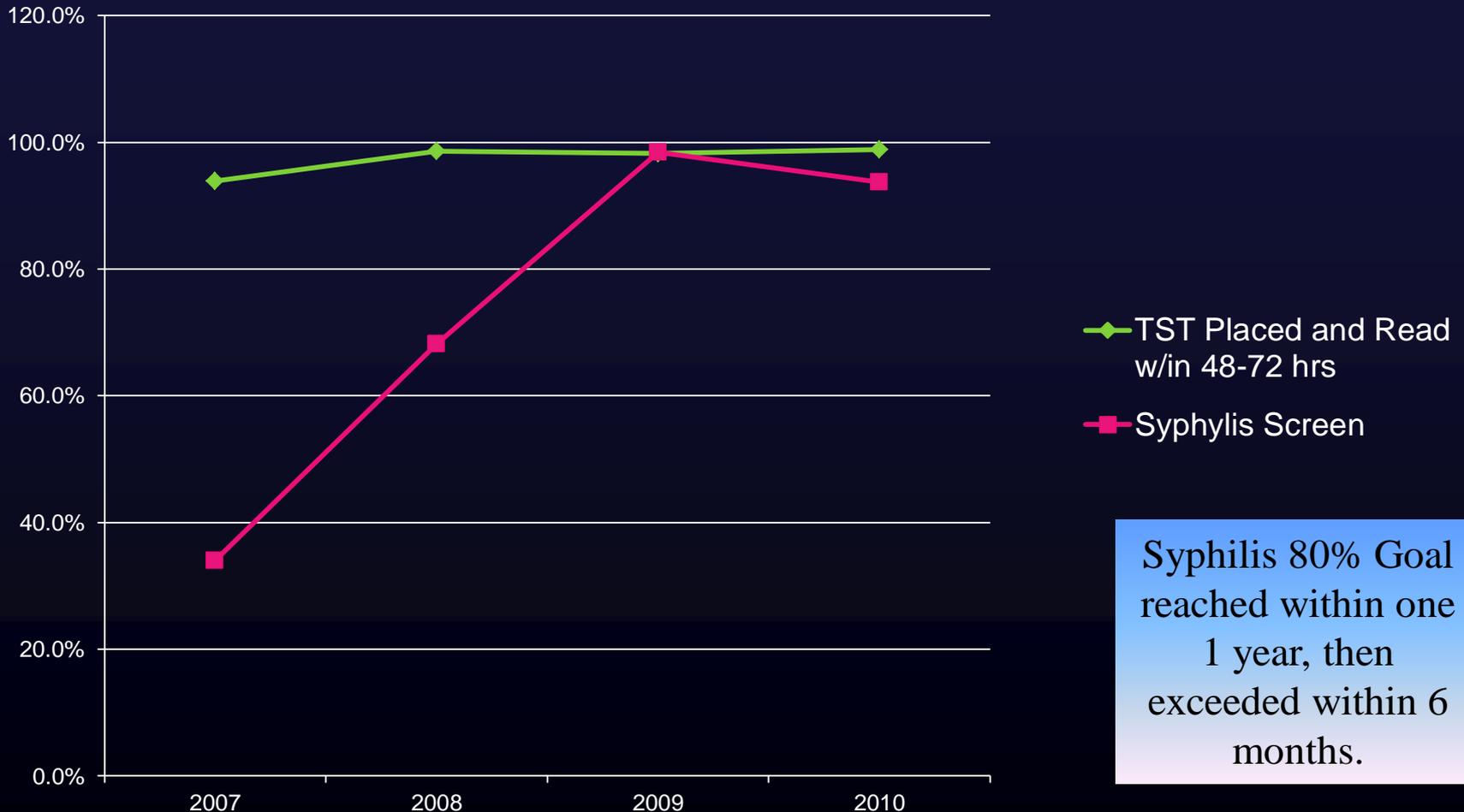
## in+care eCOMPAS Dashboard

- At-a-glance
- Visual
- Red/Green
- Populations
- Region vs. Provider
- Drilldown



# Peer Learning Network

# Process Improvement TST and Syphilis

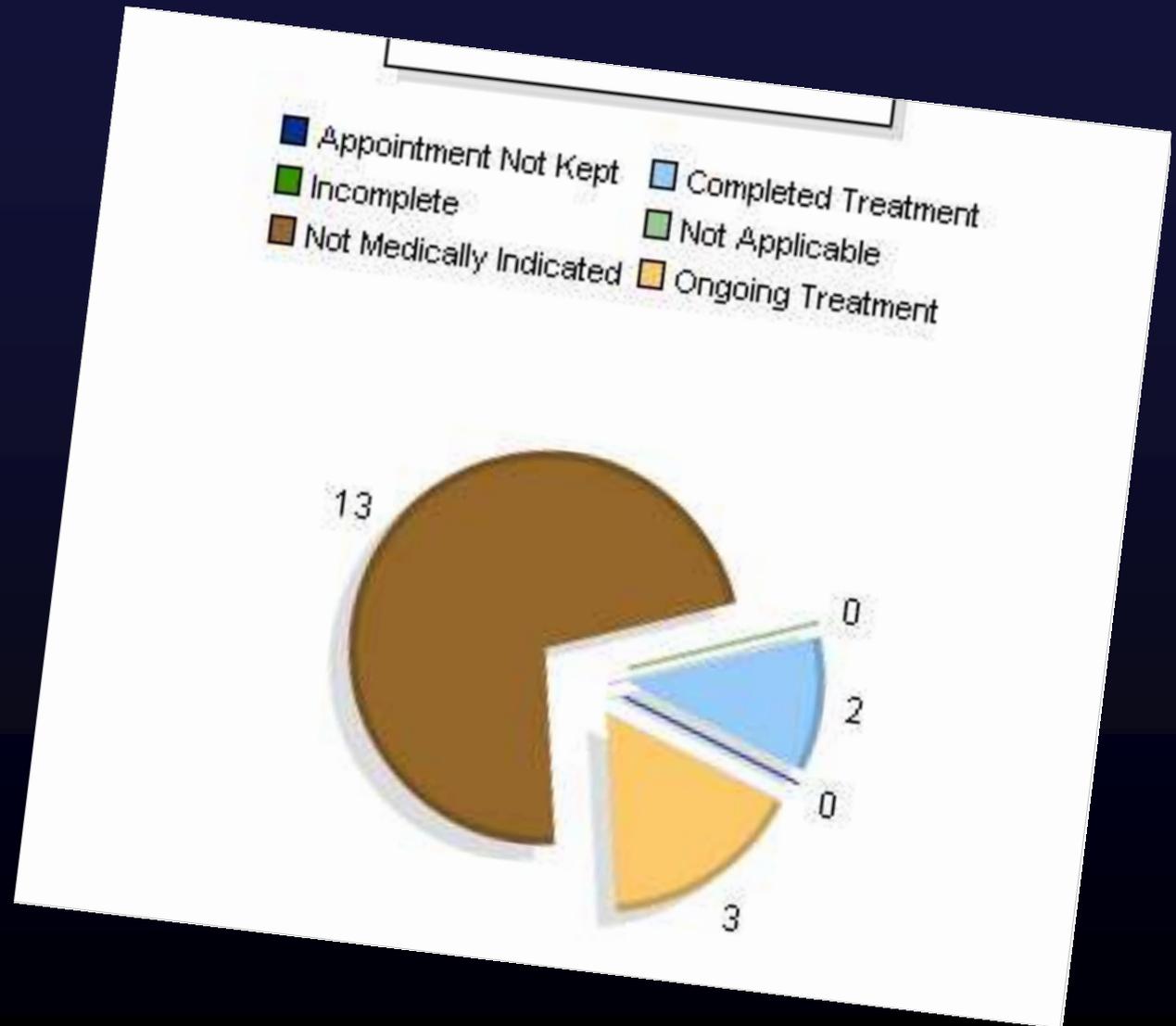


Syphilis 80% Goal reached within one 1 year, then exceeded within 6 months.

# St. Mary's Hospital

## Syphilis Project Improvement Positives

As per *e2*,  
this is the  
breakdown of  
those positive  
in treatment.



## Intervention 3:

Proactive Alerts and Reminders  
in eCOMPAS

# Agency Alerts

[Search](#)[Bulk/Group](#)[Referrals](#)[Outreach](#)[Useful Links](#)[Tracker](#)[QM \(799\)](#)[Alerts](#) | [Alert Subscriptions](#) | [Journaling](#)

## Summary of Current Alerts

Click on each alert for details.

Type	Upcoming Alerts	Past-Due Alerts	Recommendation
CD4 test not performed within past three months <a href="#">[?]</a>	<a href="#">0</a>	<a href="#">160</a>	Consider scheduling or following-up to conduct CD4 test
VL test not performed within past three months <a href="#">[?]</a>	<a href="#">0</a>	<a href="#">164</a>	Consider scheduling or following-up to conduct a VL test
No medical appointment in the past three months <a href="#">[?]</a>	N/A	<a href="#">168</a>	Consider scheduling or following-up to ensure medical appointment
CD4 results less than 200 but status has not changed to AIDS <a href="#">[?]</a>	N/A	<a href="#">7</a>	Review records and ensure the HIV Status is correct. It may need to be changed to AIDS.
No TB/TST conducted within 12 months of the last TB/TST <a href="#">[?]</a>	N/A	<a href="#">122</a>	Consider scheduling or following-up to conduct TB/TST
Active clients who have not received any services in the past 6 months <a href="#">[?]</a>	N/A	<a href="#">178</a>	Review client records and try to reconnect them to services or mark as inactive.

All recommendations assume that you first ensure that the data (e.g., CD4 test date and value) has been entered into eCOMPAS.

If you wish to suggest a new alert click [here](#)

# Agency Alerts Drilldown

[Search](#)
[Bulk/Group](#)
[Referrals](#)
[Outreach](#)
[Useful Links](#)
[Tracker](#)
[QM](#)

[Alerts](#) | [Alert Subscriptions](#) | [Journaling](#)

## Summary of Current Alerts

Click on each alert for details.

Type	Upcoming Alerts	Past-Due Alerts	Recommendation
CD4 test not performed within past three months <span style="float: right;">[?]</span>	0	160	Consider scheduling or following-up to conduct CD4 test
VL test not performed past three months			Consider scheduling or following-up to conduct a VL test
No medical appointment the past three months			Consider scheduling or following-up to ensure medical appointment
CD4 results less than but status has not of AIDS			Review records and ensure the HIV Status is correct. It may need to be changed to AIDS.
No TB/TST conducted 12 months of the last			Consider scheduling or following-up to conduct TB/TST
Active clients who have received any services 6 months			Review client records and try to reconnect them to services or mark as inactive.

ADM304231
[Close]

ADM837106

AFF234024

AGM68930

AKF081401

AKF698605

APM000418

ARF613718

AVM764014

BDF733019

BPF911810

CBM923618

CMF470719

CNM530706

CPE258630

CSF864031

DCM728809

DCM815425

# Linked to Exact Screen

## Basic Information

ID:	[REDACTED]	Status:	Active	First Name:	A*	Last Name:	K*
Gender:	Female	SSN:	6986	Birth Date:	[REDACTED]	Age:	51

Alerts:	<b>CD4</b>	<b>Viral Load</b>
<a href="#">more...</a>	<b>Missed Medical Appointm</b>	<b>TB / TST Due</b>

Last Medical Visit:

HIV Care Specialist:

[General Info](#)

[Medical](#)

[Direct Services](#)

[Lookup](#)

[Client Referrals](#)

[Outcomes](#)

[Alerts \(5\)](#)

[Demographics](#) | [HIV and AIDS Info](#) | [Socio-Economic Info](#) | [Income Data](#) | [Income Sources](#) | [Documents on File](#) | [Notes](#)

## Client Information

[top](#)

Current Gender	Female	Gender at Birth	<b>Female</b>
CM (non-medical)			
Medical CM			
Zip Code		Birth Place	
County	<b>PASSAIC</b>	City	<b>CLIFTON</b>
		State	<b>NJ</b>

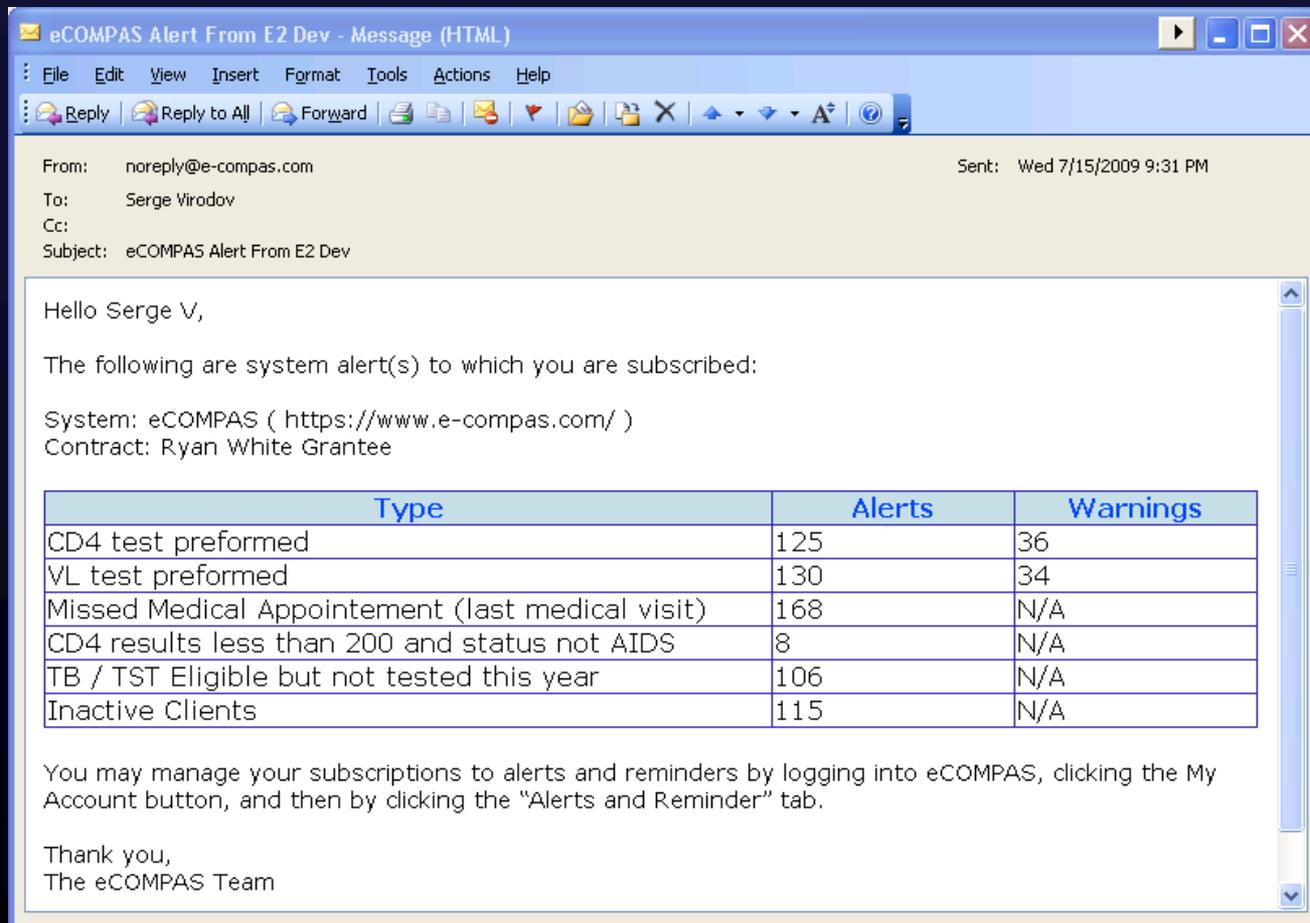
## Client Status

[top](#)

Client Status	Referral Source
Active	

# Email Alerts

- Proactive, regular, *push* notification
- Supervisors are more likely to read email



The screenshot shows an email client window titled "eCOMPAS Alert From E2 Dev - Message (HTML)". The window includes a menu bar (File, Edit, View, Insert, Format, Tools, Actions, Help) and a toolbar with icons for Reply, Reply to All, Forward, Print, and other actions. The email content is as follows:

From: noreply@e-compas.com Sent: Wed 7/15/2009 9:31 PM  
To: Serge Virodov  
Cc:  
Subject: eCOMPAS Alert From E2 Dev

Hello Serge V,

The following are system alert(s) to which you are subscribed:

System: eCOMPAS ( <https://www.e-compas.com/> )  
Contract: Ryan White Grantee

Type	Alerts	Warnings
CD4 test preformed	125	36
VL test preformed	130	34
Missed Medical Appointment (last medical visit)	168	N/A
CD4 results less than 200 and status not AIDS	8	N/A
TB / TST Eligible but not tested this year	106	N/A
Inactive Clients	115	N/A

You may manage your subscriptions to alerts and reminders by logging into eCOMPAS, clicking the My Account button, and then by clicking the "Alerts and Reminder" tab.

Thank you,  
The eCOMPAS Team

# Outcomes

# Electronic health information technology as a tool for improving quality of care and health outcomes for HIV/AIDS patients

- [Patricia H. Viree](#) [Bangook Jin](#) [Jesse Thomas](#) [Sergey Viradov](#)

## Highlights

- ▶ Health information technology (HIT) is shown to benefit quality of care for HIV/AIDS patients.
- ▶ An easy-to-use system responsive to users' needs effectively facilitates rigorous application of quality improvement methods.
- ▶ HIT can lead to improved health outcomes for HIV/AIDS patients.

## Abstract

### Purpose

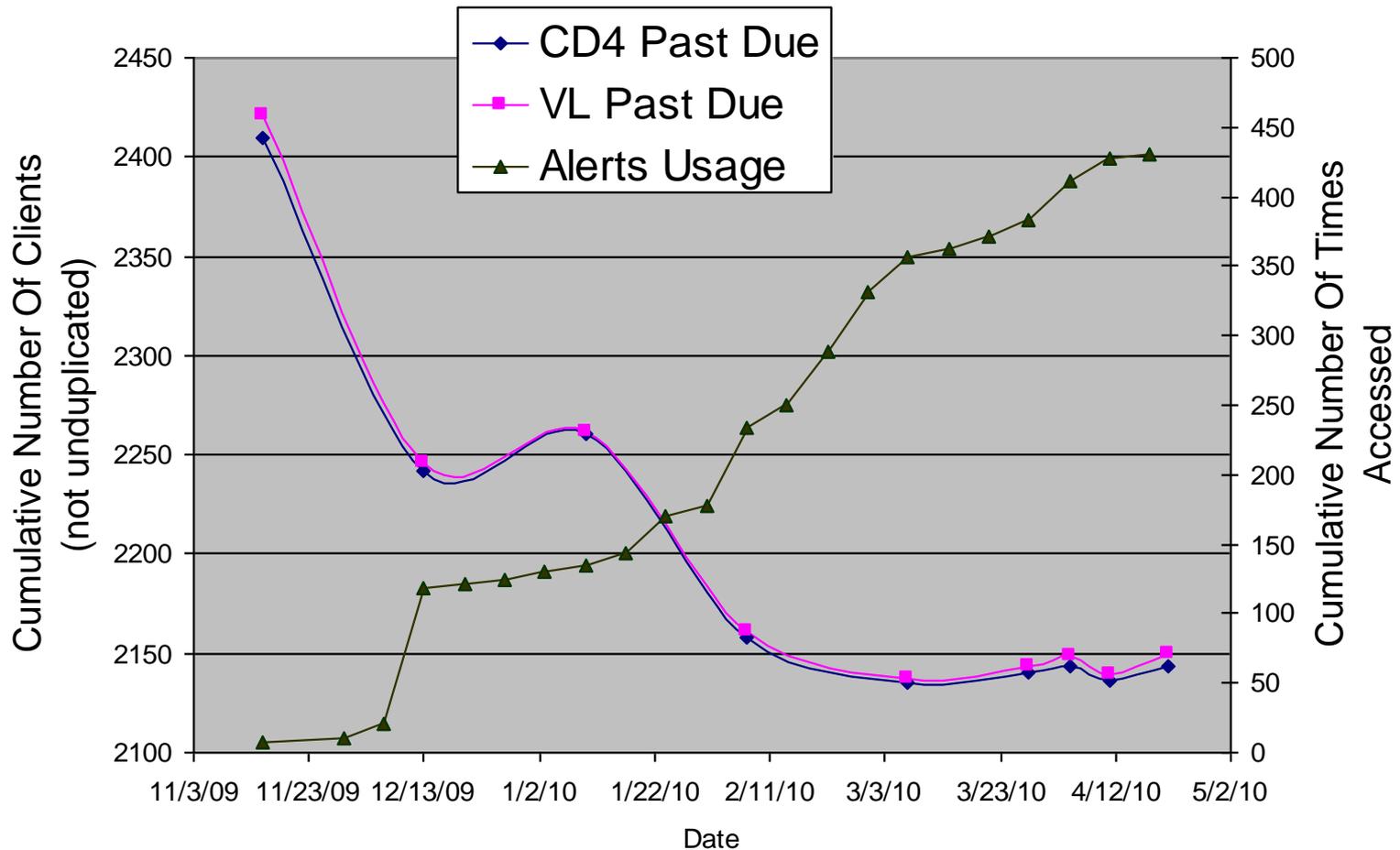
This paper presents research on the interplay of health information technology (HIT), quality improvement and progression of health status. The purpose of the research was to determine whether electronic exchange of health information impacts quality of care and, by extension, health outcomes of patients with HIV/AIDS. The research was supported as a demonstration project under the Information Technology Networks of Care Initiative sponsored by the U.S. Health Resources and Services Administration, HIV/AIDS Bureau, Special Projects of National Significance (SPNS). The City of Paterson, New Jersey, Department of Health and Human Services administered the project as the grant recipient, secured and managed through the City of Paterson's Ryan White Part A Program of Bergen and Passaic Counties.

### Methods

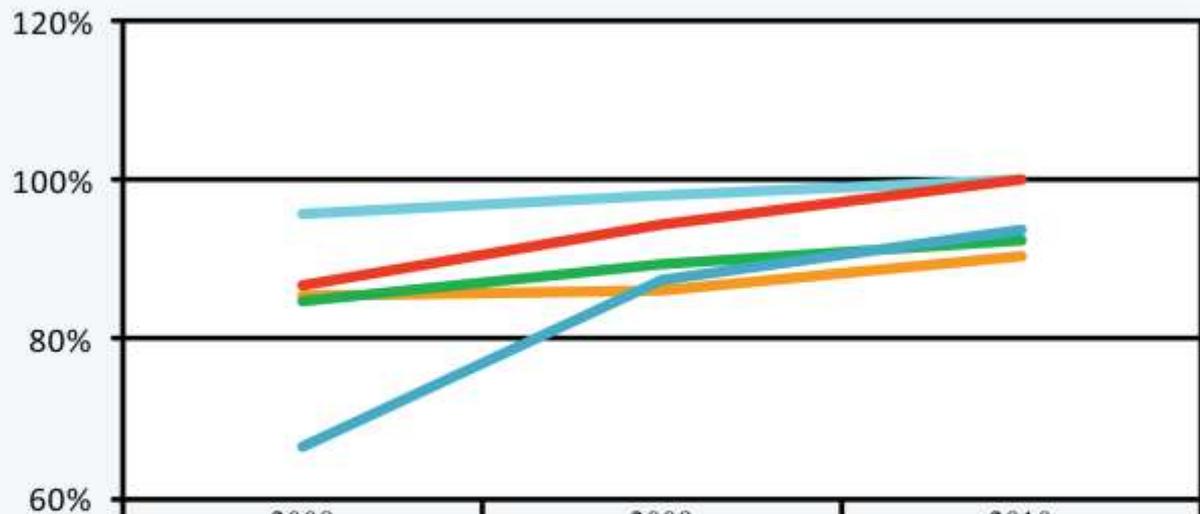
We implemented a web-based health information support system, e2, to facilitate rigorous quality improvement activities associated with care and treatment of HIV/AIDS patients. We used e2 to monitor patient care in the clinic setting. We observed five quality and two health status indicators relating to the care of 263 HIV/AIDS medical patients at three HIV/AIDS medical clinics from 2008 to 2010. The quality indicators conformed to HIV/AIDS Bureau (HAB) Groups 1 and 2 definitions of two or more CD4 T-cell counts performed in the measurement year, AIDS patients prescribed HAART, two or more medical visits in the measurement year, PCP prophylaxis administered to AIDS patients with CD4 T-cell counts <200, and adults screened for syphilis within the measurement year. CD4 T-cell count and viral load suppression indicators were used as health status indicators. Frequency analysis and logistic

# Usage of Alerts Makes a Difference

## Alerts Usage vs. Number of Alerts

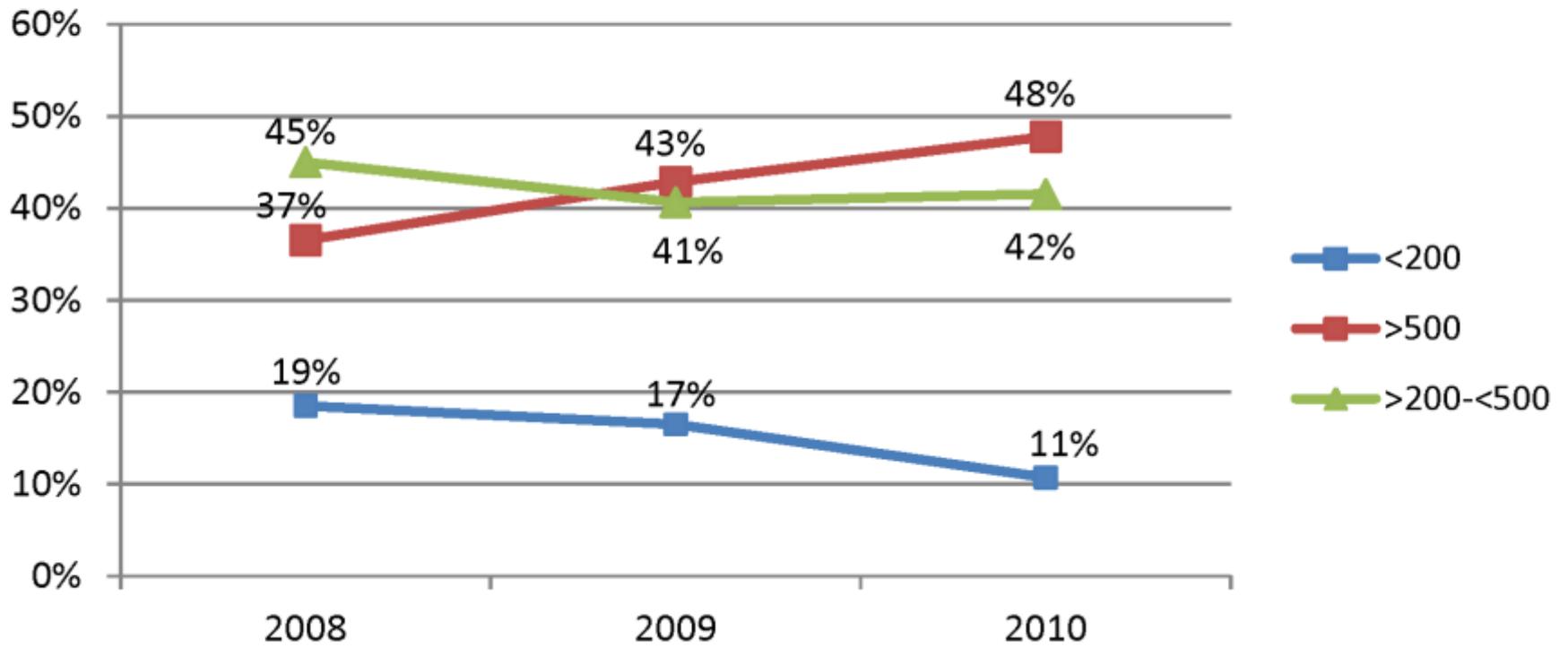


## Process Improvement Indicators 2008 - 2010

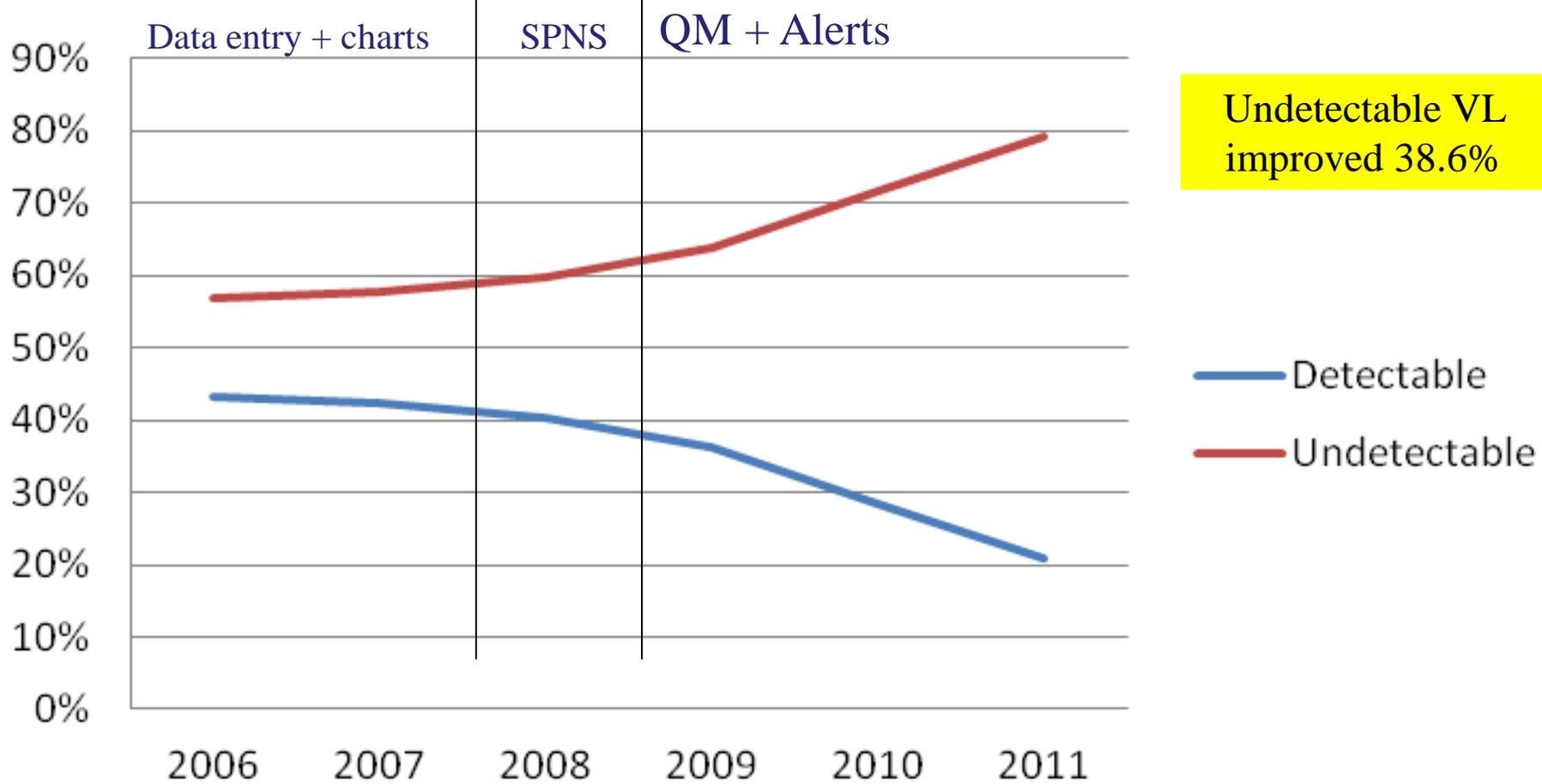


	2008	2009	2010
2 CD4 tests in a year	0.85	0.86	0.91
Prescribed HAART	0.96	0.98	1.00
2 or more medical visits in HIV setting	0.85	0.90	0.92
CD4 T-cell count < 200 prescribed PCP	0.87	0.95	1.00
Test for syphilis performed within the measurement year	0.66	0.87	0.94

## CD4 T-cell Count 2008-2010



# Viral Load 2006-2011



2006-2007 prior to SPNS, all medical patients

# Quotes from SPNS Partners

- ❖ “...e2 has definitely improved the patients’ **response to care.**”
- ❖ “Our patients have shown **enthusiasm** for the program. ... a few have even stated they thought that **‘we care more’** about them...”
- ❖ “It is our belief that since the onset of the SPNS project, many of our clients have become **happier and healthier.**”

# User / Stakeholders Responses

- “eCOMPAS is a no-brainer; it gives us **structure**. The meetings are helpful.” – Nurse
- “I like the system. It gives us a **uniform structure**. I like structure as a supervisor because of **new staff**. We designed the enhancements continuously. Meetings have been invaluable.” – Program Director
- “The system is wonderful. **It is my teacher. It tells me my priorities.** It’s better than looking through charts. It is very helpful to me.” – Nurse
- “Done an incredible amount of work to make eCOMPAS. Easy to use. Very useful when I’m on the phone. I can be more responsive. It is useful for case conferencing. **I can look up information myself instead of calling and interrupting staff.** The reporting is helping us to change and improve the way we do things.” – Nursing Supervisor
- “eCOMPAS helps us to prioritize and organize. It **helps us to follow-up with the doctor.**” – Nurse
- “This system is very important to me. It tells me what to do to get them back in care. **There is always an announcement of something nice that is new.**” – Medical Assistant

# Final Story:

A Story of Replicability and Collaboration

Columbia University / New York Presbyterian

and

The Bergen-Passaic TGA

# Cross-Region Collaboration

- **SPNS** brought together Bergen-Passaic TGA & NYP.
- **NYP** adopts eCOMPAS system and approach for Comprehensive HIV Program (1800+ patients).
- **SPNS** provides supplemental funds for NYP to use eCOMPAS to redesign a Patient Portal Prototype.
- **The Bergen-Passaic TGA** adopts the NYP eCOMPAS Patient Portal and connects it to its own Health Information Exchange

**Background:**

**Bergen-Passaic as Pioneer in  
Web-Based Consumer Access**

--- k e y ---



STRONGLY  
AGREE

FUERTEMENTE  
ESTE DE  
ACUERDO



AGREE

ESTAR DE  
ACUERDO



SOMETIMES  
AGREE

A VECES ESTE  
DE ACUERDO



DISAGREE

DISCREPAR



STRONGLY  
DISAGREE

FUERTEMENTE  
DISCREPAR



NOT  
APPLICABLE

NO APLICABLE

- 1.1. I feel comfortable talking to my case manager.  
Siento hablar c?modo con mi encargado del caso.



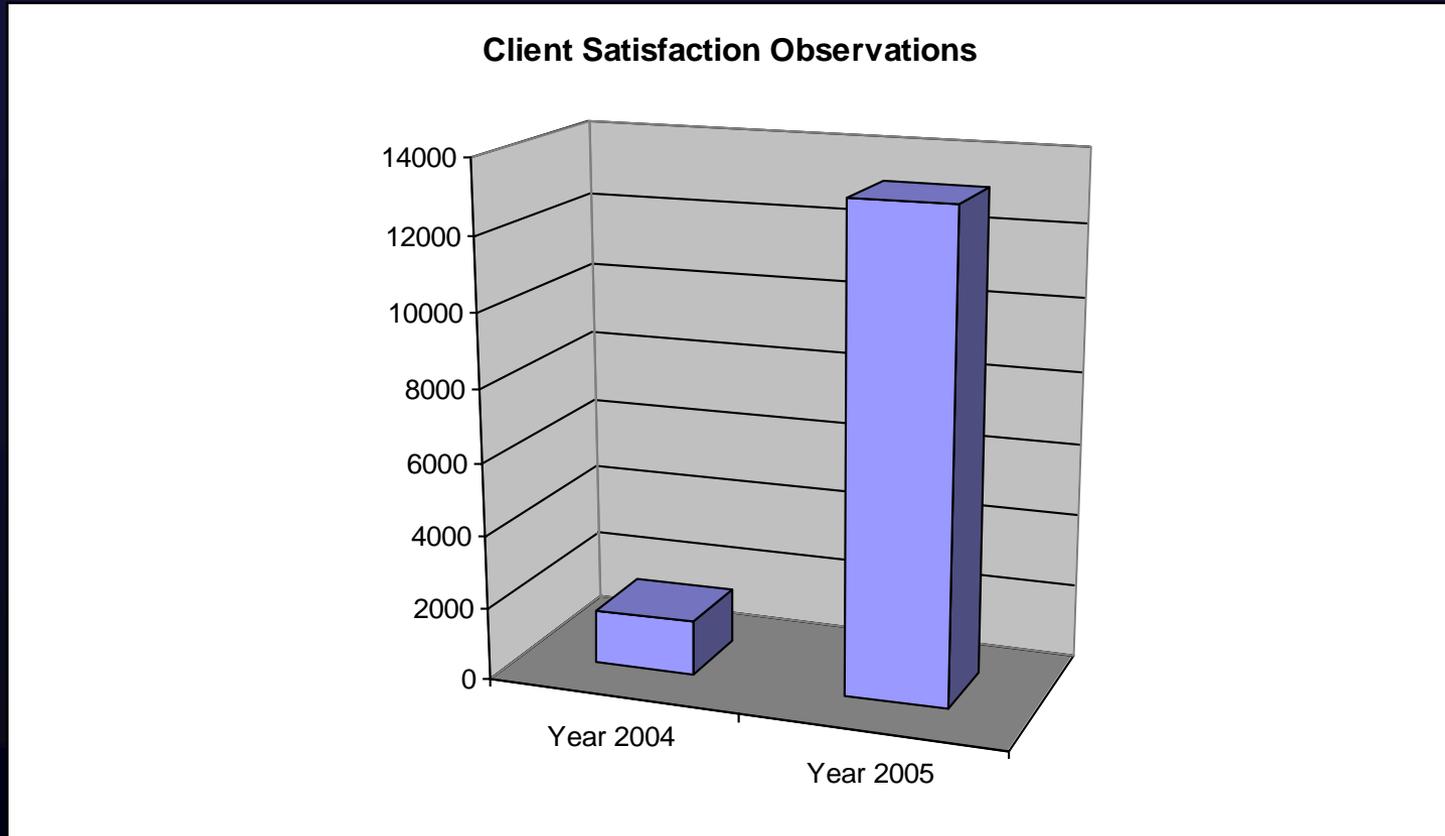
- 1.2. I am able to tell my case manager about things that I need.  
Puedo decir a mi encargado del caso sobre cosas que necesite.



- 1.3. I am able to tell my case manager about things that get in the way of my care.  
Soy capaz de decir ami encargado del casa acerca de las cosas que me molestan.



# Comparison of Number of Observations



**We were expecting response rates to drop in moving from paper-based to web-based surveys. Instead going web-based produced a surprising increase in response rates for a primarily urban, disadvantaged population, making internet access barriers a myth.**

How many times have Consumers  
logged in to use eCOMPAS in  
Bergen-Passaic?

**2,612**



Home



Care Information



Reports



Tools



My Account



Help



Logout

Home > Care Information



### About Me



Name	A W	E2ID	AWM021653	Date Of Birth	01/02/1990
Email	serge@rdsystems.com	Address	.	Current Gender	Male
			07086		



### My Health Care Providers



Case Manager(non-medical)	MARIE A. HILL	Organization	BUDDIES OF NJ	Phone Number	2014892900
Case Manager(medical)	SUSAN STOVEKEN	Organization	BUDDIES OF NJ	Phone Number	2014892900
HIV Care Provider	Hackensack University				

### CD4



Result Date	Count	Action
12/22/2010	996	
06/02/2010	938	
08/23/2011	931	
03/14/2011	927	
05/31/2011	911	

Showing 1 to 5 of 11 entries



### Viral Loads



Result Date	Count	Undetectable	Action
06/02/2010	471	No	
05/12/2009	206	No	
10/26/2009	143	No	

#### My Information

CD4

Viral Loads

STI

HIV Meds

Other Meds

Adherence

ER / Hospital

TB(TST)

Annual Physicals

Screenings

Immunizations



Home



Care Information



Reports



Tools



My Account



Help



Logout

My Information

CD4

Viral Loads

STI

HIV Meds

Other Meds

Adherence

ER / Hospital

TB(TST)

Annual Physicals

Screenings

Immunizations

Home > Care Information



About Me



Name	A W	E2ID	AWM021653	Date Of Birth	01/02/1990
Email	serge@rdesystems.com	Address	, 07086	Current Gender	Male



My Health Care Providers



Case Manager(non-medical)	MARIE A. HILL	Organization	BUDDIES OF NJ	Phone Number	2014892900
Case Manager(medical)	SUSAN STOVEKEN	Organization	BUDDIES OF NJ	Phone Number	2014892900
HIV Care Provider	Hackensack University				

CD4



## My Information

CD4

Viral Loads

STI

HIV Meds

Other Meds

Adherence

ER / Hospital

TB(TST)

Annual Physicals

Screenings

Immunizations

Home



Care Information



## About Me

<i>Name</i>	A W	<i>E2ID</i>	AWM02165
<i>Email</i>	serge@rdesystems.com	<i>Address</i>	, , 07086



## My Health Care Providers

<i>Case Manager(non-medical)</i>	MARIE A. HILL	<i>Organization</i>
<i>Case Manager(medical)</i>	SUSAN STOVEKEN	<i>Organization</i>
<i>HIV Care Provider</i>	Hackensack University	

## CD4

Result Date



Count

## HIV Meds



Therapy	Medication	Start Date	End Date	Dosage Notes	Action
HAART	Atripla	04/15/2009		i po daily HS	

Showing 1 to 1 of 1 entries



## Other Meds



Medication	Start Date	End Date	Dosage Notes	PCP Prophylaxis	Action
Levaquin	06/29/2011	07/04/2011	750 mg po i tab daily	No	
ciprofloxin	06/29/2011	07/06/2011	i tab po bid for 7 days	No	
levaquin	06/29/2011	07/04/2011	750 mg i po daily for 5 days	No	
MVI	01/03/2011		i po daily	No	
Vitamin D	01/03/2011		2000 units po daily	No	

Showing 1 to 5 of 11 entries



## Adherence



Evaluation Date	Adherence Days	Barrier	Notes	Action
01/14/2012	4/4 Days	None		

Showing 1 to 1 of 1 entries



## ER / Hopspital



Hospitalization	Admission Date	DischargeDate	Complaint	Action
HIV/AIDS related Hospitalization	02/14/2010	02/14/2011	asthma	

Showing 1 to 1 of 1 entries



## Screenings



Screening	Screening Date	Notes	Action
Comprehensive Metabolic Screening	08/23/2011		
Comprehensive Metabolic Screening	05/31/2011		
Mental Health	04/06/2011		
Substance use	04/06/2011		
Comprehensive Metabolic Screening	03/14/2011		

Showing 1 to 5 of 19 entries



## Immunizations

### Pneumococcal

Dose given on: 08/19/2009

Notes:

### Influenza (TIV)

Dose given on: 09/09/2009

Given Elsewhere



Home



Care Information



Reports



Tools



My Account



Help



Logout

Home > Reports

### I would like to view information about...



My Notes and Annotations



*Lorem ipsum dolor sit amet, consectetur adipisicing elit, sed do eiusmod tempor incididunt ut labore et dolore magna aliqua...*



My appointments & Reminders



*Lorem ipsum dolor sit amet, consectetur adipisicing elit, sed do eiusmod tempor incididunt ut labore et dolore magna aliqua...*



Home



Care Information



Reports



Tools



My Account



Help



Logout

Go back to Patient Portal Home

Home > Tools

### I would like to...



Give someone temporary access to my information



*Lorem ipsum dolor sit amet, consectetur adipisicing elit, sed do eiusmod tempor incididunt ut labore et dolore magna aliqua...*



Print my information



*Lorem ipsum dolor sit amet, consectetur adipisicing elit, sed do eiusmod tempor incididunt ut labore et dolore magna aliqua...*



Save my information on my computer



*Lorem ipsum dolor sit amet, consectetur adipisicing elit, sed do eiusmod tempor incididunt ut labore et dolore magna aliqua...*

## In Summary

- ❖ Through an innovative mix of electronic networks of care and collaboration, Paterson has improved access to quality health care and improved patient outcomes.
- ❖ Paterson has achieved sustainability and opportunities for replication.
- ❖ Others have successfully replicated these efforts.

# Critical Success Factors

- ❖ Involvement
- ❖ Responsive and User-friendly Platform
- ❖ Organic process
- ❖ Collaboration

**We built a platform and culture that facilitates coordination and continuous quality improvement through a direct relation between the system, the process and the people.**

**How can you accomplish ambitious goals?**



**One bite at a time.**

# Thank you from all of us on the Paterson SPNS Team...



(from left to right) Denise Coba, Pat Virga, Jesse Thomas, Millie Izquierdo, Jimease Green, Maria Cordova, Doug Mendez, Pricilla Moschella, Jerry Dillard, Ellen McNamara, Larry Rodgers, Blanca Roman, Anthony Fazzinga, Sandra Murillo, Maryann Collins, Irene Panagiotis, Serge Virodov, Chantia Douglas, Kathy Lebron

# Contact Information

Jesse Thomas

Jesse@rde.org

(973) 773-0244 x1001

Pat Virga

Pvirga@newsolutionsinc.com

(732) 418-3219

The Bergen Passaic TGA

[www.AIDSNJ.org](http://www.AIDSNJ.org)