C&T Indicators Report Help

Report Description
Testing activities are evaluated for meeting OA and CDC goals related to finding positives and linking them to needed services. The C&T indicators report provides summary data for these performance indicators.

How to Use This Report
Run this report at least quarterly for C&T data to evaluate interim success at meeting testing goals, including volume of testing overall and within specific populations such as race/ethnicity or risk groups; and to evaluate performance providing referral and linkage services to positives.

Filter by time frame, funding source, and PA code to review data for the project/period of interest, and consider generating additional reports separately by agency, intervention, and/or location(s) to pinpoint areas that may need attention.

Measures Reported On
This report provides indicators for testing interventions, including total tests performed, and number and percent of: positives, informed of result, referred and linked to care, referred and linked to prevention services, and offered & accepted partner services. The indicators are reported overall, and also stratified by gender, race/ethnicity, age group, risk level, and risk group. Separate tables can be generated for newly-identified confirmed positives, previous positives, preliminary positives, and/or all positives combined.

Note that since negative records are not entered into LEO for screening interventions, the “Total Tested” and “percent positive” values are not meaningful for reports that include Healthcare Testing Form (HTF) data.

Programs & Forms Included
Reports on data from the Testing program, including Counseling and Testing interventions (CIF/CAQ data) and Screening interventions (HTF data).

Report Definitions

Report Tables: Positive Types
This report can generate a separate table for each “positive type” along with a comprehensive table that combines values for all positives. The positive types are:

1. Newly-identified Confirmed Positives: Records with a confirmed positive result in which the client did NOT report a previous confirmed positive result.
2. Previous Positives: Records with a confirmed positive result in which the client DID report a previous confirmed positive result.
3. Preliminary Positives: Records with a preliminary positive rapid test result and no confirmatory testing conducted, regardless of previous testing history.
In the LEO Report generation interface, specify which positive type tables to include by checking the box next to each type. “Newly-identified confirmed positives” is checked by default.

Note that for each table, the first two columns (Total Tests and Informed of Test Result) include ALL records with a test performed, whereas the remainder of the table (Indicators 1 – 9) report only on the specified type of positive, as indicated in the table heading.

**Report Columns: Indicators**
Under each column heading two values are reported: a number and a percent. The percent is always the number reported divided by some denominator. The table below defines both the number and the denominator for each column and row, using the following format:

**Definition of the number | definition of the denominator used to calculate the percentage**

Note that small letters appear near the top of each column on the report to aid in identifying the denominators used for each percentage; e.g., c, c/a, etc.

**Indicator Definitions and Calculations**

<table>
<thead>
<tr>
<th>Column Heading</th>
<th>Number</th>
<th>Denominator Definitions</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total Tests</td>
<td>All records for which an HIV test was conducted, regardless of testing outcome(s)</td>
<td>divided by Total Tests. (Excludes records for client visits with no testing.)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>The percentages in this column use Total Tests as the denominator regardless of row, so they represent the proportion of all tests conducted on that client type. E.g., 71.1% of all tests were conducted on males.</td>
</tr>
<tr>
<td>Informed of Test Result</td>
<td>The number of records with a result provided</td>
<td>divided by the number of total tests on that row.</td>
</tr>
<tr>
<td><strong>Indicator 1:</strong> [Specified type of] Positive*</td>
<td>The number records with a [specified type of] positive test result</td>
<td>divided by the number of total tests on that row.</td>
</tr>
<tr>
<td></td>
<td>*See section above, “Report Tables: Positive Types” for more information. <strong>Note that all of the remaining indicators in a given table report only on the type of positive specified for that table.</strong></td>
<td></td>
</tr>
<tr>
<td>Each of the indicators below is defined as:</td>
<td>The number of records with the [specified type of] positive test result (Indicator 1) <strong>and</strong>...</td>
<td></td>
</tr>
<tr>
<td><strong>Indicator 2:</strong> Informed of Confirmed Result</td>
<td>...disclosure for a conventional/confirmatory test</td>
<td>divided by Indicator 1.</td>
</tr>
<tr>
<td></td>
<td>Percent of [specified type of] positives who received a confirmed result. (These columns are excluded from the preliminary positive table.)</td>
<td></td>
</tr>
<tr>
<td><strong>Indicator 3:</strong> Informed of</td>
<td>...disclosure for a preliminary or conventional/confirmatory test</td>
<td>divided by Indicator 1.</td>
</tr>
<tr>
<td>Preliminary or Confirmed Result</td>
<td>Percent of [specified type of] positives who received either a preliminary positive or a confirmed positive result.</td>
<td></td>
</tr>
<tr>
<td>------------------------------------------------------------------------------------------------</td>
<td>---------------------------------------------------------------------------------------------------</td>
<td></td>
</tr>
</tbody>
</table>
| **Indicator 4:** Referred to Care                                                             | …referral to medical care | divided by Indicator 1.  
Percent of [specified type of] positives who received a referral to medical care. |
| **Indicator 5:** Referred to Care with Verified Medical Visit                                 | …attended first medical visit | divided by the number referred to care (Indicator 4).  
Percent of those referred to care who attended their first medical visit |
| **Indicator 6:** Offered Partner Services                                                      | …offer for partner services | divided by Indicator 1.  
Percent of [specified type of] positives who were offered partner services. |
| **Indicator 7:** Accepted Partner Services                                                     | …accepted (and received) partner services, including skill-building  
| | | divided by the number offered partner services (Indicator 6)  
Percent of those offered partner services who accepted/received partner services. |
| **Indicator 8:** Referred to Prevention Services                                               | …referral to prevention services | divided by Indicator 1.  
Percent of [specified type of] positives who were referred to prevention services. |
| **Indicator 9:** Received Prevention Services                                                   | …received prevention services | divided by the number referred to prevention services (Indicator 8)  
Percent of those referred to prevention services who received prevention services. |

**Report Rows: Demographics and Risk Variables**
The rows report on each indicator by Gender, Race/Ethnicity, Age Group, Risk Level, and Risk Group. These variables are consistent across multiple reports and are defined in the Composite Variable Definitions document.

**Troubleshooting**

*Testing volume and/or number of positives not as expected*
If the report shows values for key measures that are different than expected, ensure that appropriate selections have been made on the report generation screen in LEO prior to running the report.

For instance, common errors when running the C&T Indicators report for the completion of OA progress reports include:

1. Failing to filter by funding stream. Only include the funding stream being reported on.
2. Looking at “All Positives” rather than only newly-identified positives. Be sure to select the intended “Positive Types” to include in the report, and review the correct table(s).
3. Including “Incomplete” records in the report, or failing to mark complete records that you intend to include. By default only complete records are included in
reports to avoid reporting on records for which services have not been completed.

**No data in report**
Be sure to select interventions and locations for which services have been provided during the time frame being reported on.

**Still having problems?**
- Report a bug: LEOFeedback@cdph.ca.gov
- Request assistance: LEOHelp@cdph.ca.gov