HUMAN SERVICES DEPARTMENT

COMMUNITY PARTNERSHIPS DIVISION

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Disease Case Management Network Meeting Minutes

Date: February 3, 2023, 2:30 p.m. – 3:45 p.m.
Location: Zoom Virtual Meeting Platform
Facilitator: Clinical Quality Management Support Staff

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Providers Present

AHF: Lisyani Machado

BCOM: Magaly Gousse

Broward Health: Absent
Broward House: Bobby Baker
Care Resource: Bobby Joe
MHS: Amy Pont, Cherise Martin

CQM & PCS Support Staff: Brianne Miller, Danielle Liao, and Maunika Patel

Part A Recipient Staff: Tim Thompson

Guests: Debbie Cestaro-Seifer

I. Call to Order

The meeting was called to order at 2:33 p.m.

II. Welcome/Introductions

CQM Support Staff welcomed all attendees, made a statement of the meeting's goal, and made individual introductions.

III. Presentation: Quarter 3 Data Presentation

CQM Support Staff reviewed the 2021 HIV Care Continuum data for the state of Florida, Broward County, and the Ryan White Broward EMA. Staff noted that the retention rate for the Ryan White Broward EMA increased to 73.0%, which is on par with the state of Florida and Broward County. Broward Ryan White Part A (87.7%) has the highest viral suppression rate compared to Broward County (70.4%) and the state of Florida (69.3%). The CQM Support Staff reported on the HIV Care Continuum data for the Disease Case Management (DCM) network comparing quarter 3(Q3) FY21-22, quarter 2(Q2) FY22-23, and Q3 FY22-23. The numbers were consistent only deviating by less than 1% for most categories. The viral suppression rate had increased by 3% from Q2 FY22-23 to Q3 FY22-23.

Additionally, the service category data was drilled down by three subpopulations: gender, race/ethnicity, and age. For each subpopulation, FY22-23 Q3 data was compared to FY22-23 Q2 data.

Starting with the gender subpopulation, the transgender clients (85.71%) remained the same for all three categories: retention in care, prescribed ARV, and viral suppression. For retention in care, the female clients decreased by 2.74%, while the male clients had an increase of 1.49% during the reporting period. Alternatively, for prescribed ARV, female clients had a slight increase of less than 1%, while male clients had a slight decrease of less than 1% between quarter two and quarter three. For viral suppression, both the female (89.06%) and male (84.36%) clients had increased by 3% in the reporting period.

Following gender, CQM Support Staff focused on the race/ethnicity subpopulation. For retention in care, both the Black Non-Hispanic (<1%) and Hispanic/Latinx (4.17%) clients increased from Q2 to Q3, while White Non-Hispanic (3.57%) clients decreased. Black Non-Hispanic (4.11%), Hispanic/Latinx (1.74%), and White Non-Hispanic (2.37%) had an overall increase in viral suppression during the reporting period.

Lastly, the age subpopulation had a few notable trends that the CQM Support Staff highlighted. For retention in care, ages 18-28 had the highest increase in retention by 15.57%. For viral suppression, all the age groups had increased in this category except for ages 59 and older. Some of the notable changes in viral suppression were at ages 18-28(4.97%), 29-38(4.34%), and 39-48(6.26%).

At the end of the presentation, the CQM Support Staff asked the DCM Network if they had any questions about the data review. A representative from Positive Outcomes asked if the transition from one age group to another was accounted for in the analysis. The concern was that the high percentage of those retained in care might be due to an influx of clients entering the 18-28 age group. The CQM Support Staff responded that the team is conducting a deeper dive into the 18-28 age range by identifying barriers, isolating and tracking clients over time, and looking at

service utilization. A CQM Support Staff team member also suggested looking at those individuals rolling into the system of care in either direction for this specific age group every six months and identifying the characteristics of that group. They then asked the Network to provide any qualitative feedback about the youth population. A representative from Care Resource stated that the youth population needs specific targeted care because they are more fragile compared to other age groups.

IV. Certified Peer Specialist in HIV Care Program Discussion with Debbie Cestaro-Seifer

Debbie Cestaro-Seifer discussed her upcoming Certified Peer Specialist in HIV Program, an AETC project that is piloted in Florida due to the need for more peers based on survey feedback. The program will be split into two parts. Part one will consists of online modules, located on Canvas and three in-person sessions. The three in-person sessions will be located in four areas of Florida: Broward, Orlando, Alachua, and Palatka. Part two will be a preceptorship which would look different depending on each region and the individual peer. The preceptorship is 80 hours total, with flexibility based on the individual. A representative from Memorial Health had a question about eligibility for the new peer specialist program for a peer who participated in a similar program a few years ago. Debbie responded that they are more than welcome to join and will receive a statewide certification of completion for this program. A representative from Broward House had a question regarding the flexibility of hours in the preceptorship. Debbie said that individuals create their hours depending on their schedule, and she encourages peers to branch out to different agencies to gain more experience.

V. Announcements

The CQM Support Staff made an announcement regarding the Provider Appreciation Week which will be held from February 6th to February 10th between the hours of 1 p.m. and 2 p.m.

A representative from EHE announced to the Network that the office is currently reviewing expenditures for each agency ensure that they update their Provider Enterprise invoicing as soon as possible.

VI. Adjournment

The meeting was adjourned at 3:18 p.m.

Next Meeting Date: May 5, 2023, at 2:30 p.m.