Fort Lauderdale/Broward County EMA
Broward County HIV Health Services Planning Council
An advisory board of the Broward County Board of County Commissioners
200 Oakwood Lane, Suite 100 • Hollywood, Florida 33020 954-561-9681 • FAX 954-561-9685

Quality Management Committee Meeting

AGENDA

Date: September 20, 2021 at 12:30 p.m.
Location: WebEx Virtual Meeting Platform
Chair: Bisiola Fortune-Evans
Vice Chair: David Shamer

Facilitator: CQM Support Staff
quality@brhpc.org
(954) 561-9681 ext. 1343

QMC Purpose: To ensure quality, comprehensive care, and to positively impact the health of people with HIV at all stages of illness.

1. **Call to Order**
2. **Welcome & Public Record Requirements**
   a. Welcome
   b. Review Meeting Ground Rules, Public Comment and Public Record Requirements (Statement of Sunshine)
   c. Council Member, Guest, and Phone Introductions
   d. Moment of Silence
3. **Approvals**
   a. Meeting Agenda 09/20/21
   b. Last Meeting Minutes 07/19/21
4. **Public Comment (10 minutes)**
5. **Standard Committee Items**
   I. **CQM Work Plan Progress Review (Handout A)**
   Work Plan Activity 4.1: Review progress made on completing the CQM Annual Work Plan and achieving annual CQM Program goals.
   ACTION ITEM: Review QMC's FY2021 CQM Work Plan progress.
6. **Unfinished Business**
   None.
7. **Meeting Activities/New Business**
   I. **Network Overview: FY2021 Q2 (Handout B)**
   Work Plan Activity 3.3: Provider Network updates to the QMC and gather feedback/suggestions for the Quality Network.
   ACTION ITEM: Review Network activities conducted in the second quarter of FY2021.
   II. **Oral Health No-Show Tracking Report (Handout C)**

Work Plan Activity 3.2: Disseminate Ryan White Part A Program data and activities to the HIVPC and Committees, providers, and community stakeholders.
Work Plan Activity 3.4: Provide routine CQM Program updates to the HIVPC.
ACTION ITEM: Discuss the completed Oral Health No-Show Tracking project.

III. **Staffing Update**
ACTION ITEM: Discuss changes to CQM staffing.

8. **Recipient's Report**

9. **Public Comment (10 minutes)**

10. **Agenda Items/Tasks for Next Meeting**

a. Next Meeting Date: October 18, 2021, at 12:30 p.m. via WebEx Videoconference

b. Next Meeting Agenda Items

- Client Satisfaction Survey Discussion
- FY2021 Q2 Ryan White Part A Data
- Ryan White Part A Data Drilled Down by Insurance

11. **Announcements**

12. **Adjournment**

FOR A DETAILED DISCUSSION ON ANY OF THE ABOVE ITEMS,
PLEASE REFER TO THE MEETING MINUTES.
Meeting Packets are available at: The HIV Planning Council Website
(http://www.brhpc.org/programs/hiv-planning-council/)

Please complete your meeting evaluations here
Three Guiding Principles of the Broward County HIV Health Services Planning Council
• Linkage to Care • Retention in Care • Viral Load Suppression •

Meeting of the

Quality Management Committee

Monday, July 19, 2021
12:30 – 2:30 PM
By WebEx Videoconference

M I N U T E S

QMC Members Present: B. Barnes, B. Fortune-Evans, H.B. Katz, Z. Muneton, N. Markman

Ryan White Part A Recipient Staff Present: K. Giglioli

Planning Council Support Staff Present: V. Oratien, J. Ramos, W. Saint-Fleur, F. Ukpai

Guests Present: S. Cook, C. Dumas, B. Mester

Agenda Item #1: Call to Order, Welcome & Public Record Requirements

The *QMC Chair* called the meeting to order at 12:32 p.m. The *QMC Chair* welcomed all meeting attendees that were present. Attendees were notified that the QMC meeting is based on Florida's "Government-in-the-Sunshine Law" and meeting reporting requirements, including the recording of minutes. In addition, it was stated that the acknowledgment of HIV status is not required but is subject to public record if it is disclosed. Introductions were made by the *QMC Chair,* committee members, Recipient staff, PCS staff, and guests by roll call, and a moment of silence was observed.

Agenda Item #2: Meeting Approvals

The approval for the agenda of the July 19, 2021, Quality Management Committee meeting was proposed by B*. Barnes*, seconded by *N. Markman*, and passed unanimously. The approval for the minutes of the June 21, 2021, meeting was proposed by B*. Barnes*, seconded by *H.B. Katz,* and approved with no further corrections.

Mr. Barnes, on behalf of QMC, made a motion to approve the July 19, 2021, Quality Management Committee agenda as presented. The motion was adopted unanimously.

Mr. Barnes, on behalf of QMC, made a motion to approve the June 21, 2021, Quality Management Committee meeting minutes as presented. The motion was adopted unanimously.

Agenda Item #3: Public Comment

The Public Comment portion of the meeting is intended to give the public a chance to express opinions about items on the meeting agenda or to raise other matters pertaining to HIV/AIDS and services in Broward County. No public comments were made.

Agenda Item #4: Standard Committee Items

CQM Support Staff reviewed the progress made in completing the FY2021 CQM Work Plan (Handout A on file). CQM Support Staff provided data presentations to the committees, networks, and HIVPC regarding activities from Q1 2021 to the present date. The review of Service Delivery Models with SOC has been completed, and technical assistance has been provided to agencies beginning work on their Quality Improvement Projects. CQM Support Staff will begin development of the Network Member Appreciation Week in this quarter. The Client Satisfaction Survey continues to be developed by Recipient and CQM Staff. Overall, CQM Work Plan progress remains on schedule.

Agenda Item #5: Unfinished Business

There was no unfinished business for committee members to discuss.

Agenda Item #6: Meeting Activities/New Business

CQM Support Staff presented the Ryan White Part A Data Review: FY2021 Quarter 1 (Handout B on file). After the presentation, attendees asked clarifying questions regarding populations sizes, Provide Enterprise (PE) reporting, and potential ways in which data becomes skewed. After much discussion, QMC members and meeting guests concluded the agenda item with one outstanding request for information. A member requested data illustrating the difference between the total number of clients in the first quarter of FY2021 and all of FY2020. The requested presentation is intended to identify clients lost to care to improve re-engagement. For ease of comparison, it was recommended that the data request be addressed after the second quarter of FY2021 so that more comparable figures are presented.

ACTION ITEM: Provide data on total clients in care for FY2020 compared to the first half of FY2021.

Next, *Recipient Staff* provided an overview of the Program Office's activities during the first quarter of FY2021 (Handout C on file). The presentation reviewed Recipient involvement in community events and activities with providers. The Recipient is working to improve Provide Enterprise (PE) through maintenance efforts. Formulary updates are also underway at this time.

Finally, *CQM Support Staff* announced the availability and location of Quality Management Committee Orientation videos (Handout D on file). The videos provide a background of the Ryan White Part A Program and documents commonly reviewed by QMC. The videos can be viewed on the HIVPC site or on YouTube.

Agenda Item #7: Recipient Report

The Recipient's Office provided no additional report.

Agenda Item #8: Public Comment

The Public Comment portion of the meeting is intended to give the public a chance to express opinions about items on the meeting agenda or to raise other matters pertaining to HIV/AIDS and services in Broward County.

Agenda Item #9: Agenda Items/Tasks for Next Meeting

The next QMC meeting will be held on September 20, 2021, at 12:30 p.m. via WebEx Videoconference.

Members suggested that more innovative approaches towards virtual client involvement should be created. No public comments were made.

Agenda Item #10: Announcements

There were no announcements.

Agenda Item #10: Adjournment

There being no further business, the meeting was adjourned at 1:56 p.m.

QMC Attendance for CY 2021

Consumer	PLWHA	Absences	Count	Meeting Month	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Attendance Letters
				Meeting Date	C	C	15	19	CX	21	19						
0	0	0	**1**	Fortune-Evans, B. V. Chair			X	X	NQX	X	X						
1	1	**2**	**2**	Katz, H.B.			X	A	NQA	X	X						
0	1	**2**	**3**	Barnes, B.			A	X	NQA	X	X						
0	0	0	**4**	Markman, N.			X	X	NQX	X	X						
0	0	0	**5**	Muneton, Z.			X	X	NQX	X	X						
1	1	**2**	**6**	Shamer, D.			X	X	NQA	X	A						
				Quorum = 4	0	0	5	5	3	6	5	0	0	0	0	0	

Legend:	
X - present	**N - newly appointed**
A - absent	**Z - resigned**
E - excused	**C - canceled**
NQA - no quorum absent	**W - warning letter**
NQX - no quorum present	**Z - resigned**
CX - canceled due to quorum	**R - removal letter**

HANDOUT A

Broward EMA CQM Annual Work Plan FY 2021-2022

Goals and Objectives	Mar	Apr	May	June	July	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Responsible Party
Goal 1: Use client-level demographic, clinical, and utilization data to assess quality of care, identify health disparities, gaps in care, and integration of services.													
1. Analyze and report on performance measures including client demographic and utilization data, HHS/HAB measures, and locally adopted outcomes and indicators.	X		X	X	X		X			X			CQM Staff, QMC, Quality Network
2. Review and analyze findings from the annual needs assessment including focus groups, client and provider surveys, and network member evaluations and recommendations.			X	X			X			X			CQM Staff, QMC, Quality Network
3. Identify and analyze health disparities and gaps among stages of the HIV Care Continuum and make recommendations to HIVPC Committees and Networks to address findings.	X	X	X	X	X		X			X			CQM Staff, QMC, Networks
Goal 2: Implement quality improvement activities that enhance systemwide service delivery and improve client treatment, care, health outcomes, and satisfaction.													
1. Review Service Delivery Models as part of the system-wide QIP and ensure standards of care are consistent with current HIV clinical practice standards and PHS guidelines.	X	X		X	X							X	CQM Staff, QMC, Networks
2. Determine annual CQM Program goals and identify and leverage strategies to achieve goals.											X		CQM Staff, QMC
3. Identify and conduct systemwide quality improvement activities and operationalize strategies to evaluate outcomes.	X	X		X	X		X			X			CQM Staff, QMC
4. Ensure the development, implementation, and evaluation of at least one quality improvement project per agency during the fiscal year.	X		X	X			X			X			CQM Staff, Quality Network
5. Organize and conduct evidence-based trainings for providers, staff, the QMC, and the SOC to enhance knowledge on health disparities, HIV treatment and care, person-centered care, client access to eligible services, and quality improvement strategies.		X	X		X	X		X			X		CQM Staff
6. Provide technical assistance to providers as needed.	X		X	X	X	X	X			X			CQM Staff
Goal 3: Communicate CQM Program updates, data, and activities to the QMC, Networks, and community stakeholders.													
1. Distribute the annual CQM Program Report.		X											CQM Staff
2. Disseminate Ryan White Part A Program data and activities to the HIVPC and Committees, providers, and community stakeholders.	X			X	X			X			X		CQM Staff
3. Provide Network updates to the QMC and gather feedback/suggestions for the Quality Network.		X	X	X		X			X			X	CQM Staff
4. Provide routine CQM Program updates to the HIVPC.	X			X	X			X			X		CQM Staff
5. Plan and implement an annual Network Member Education and Appreciation Week focused on virtual learning and celebration of agency accomplishments.						X	X	X	X				CQM Staff
Goal 4: Routinely evaluate the CQM Program and identify areas for improvement.													
1. Review progress made on completing the CQM Annual Work Plan and achieving annual CQM Program goals.	X	X	X	X	X		X					X	CQM Staff, QMC
2. Review CQM Program performance measures for efficacy and relevance and make changes as needed.		X											CQM Staff, QMC, Networks
3. Conduct surveys of all meetings and make suggested improvements.			X			X						X	CQM Staff
4. Collaborate with the Recipient following their review of the agency-specific quality management plans for compliance with HRSA CQM Program guidelines and provide TA when indicated to agencies that require assistance in developing a compliant quality management plan.				X									CQM Staff
5. Survey efficacy of CQM Program communication methods.						X						X	CQM Staff
Goal 5: Examine current patient satisfaction strategies and initiate a new evaluation system that will allow for consistent review of the patient experience in receiving Ryan White Part A services.													
1. Review consumer feedback data from 2019-present looking for strengths and weaknesses of current evaluation system.													CQM Staff
2. Research best practices in obtaining consumer feedback about patient experience.		X	X	X	X	X							CQM Staff
3. Plan, initiate, and implement a client satisfaction/client experience plan and provide training as indicated.					X	X							CQM Staff

X = goal for objective completion

= in progress

= completed

= planned

HANDOUT B

NETWORK UPDATE: FY2021

Second Quarter Overview

HANDOUT B

Contents

About the Networks

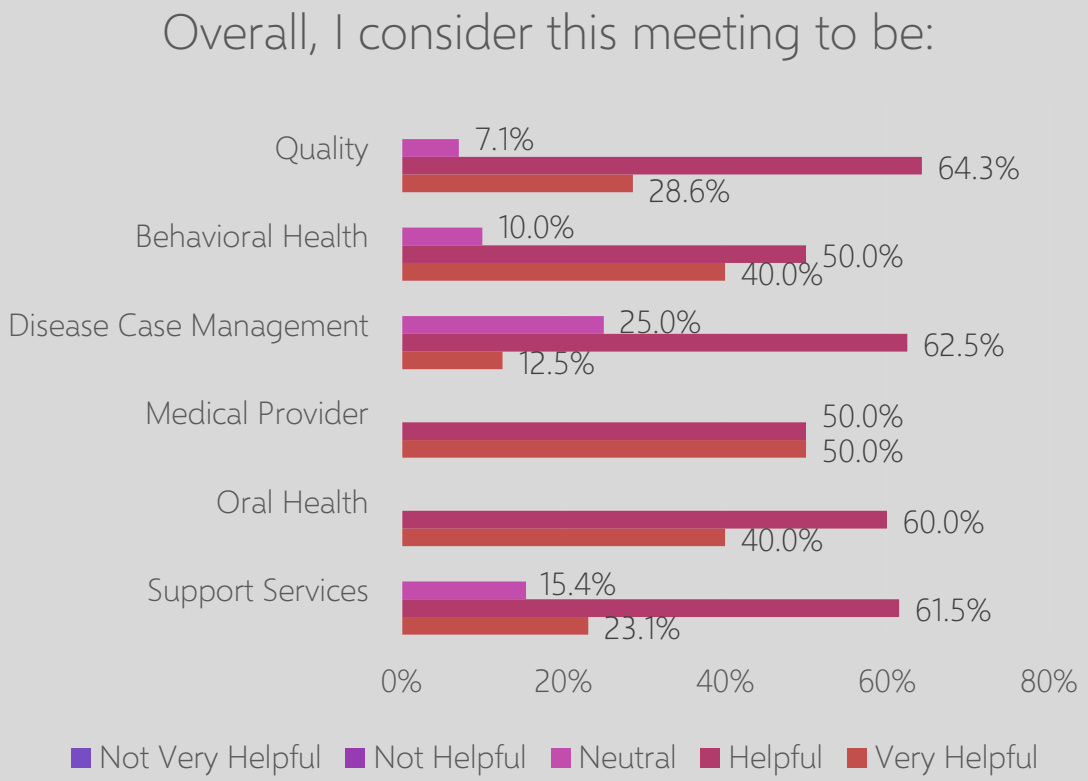
Members

- Represent Ryan White Part A-funded agencies
- Service providers discuss topics relevant to providing care in the Broward EMA
- Five networks meet quarterly
  - Quality Network meets at six-week intervals

The Networks

Member Feedback

- 56 Network Evaluation Surveys were completed by the end of the second quarter of FY2021
- Each network will review its respective results at its meeting in the third quarter of FY2021
- The survey utilized a Likert scale and open response
- While results were positive, CQM Support Staff will continue to focus on streamlining network meetings



HANDOUT B

Discussion Topics

Real World Examples

- Quality Improvement Projects (QIPs) completed by other Eligible Metropolitan Areas (EMAs)/ Transitional Grant Areas (TGAs)
- Case study from Broward County's Ryan White Part A Program

Access

- Normalizing Mental Health & Substance Abuse (Outpatient) service utilization
- Ryan White Part B & ADAP Coverage of Premiums & Copays
- COVID-19 agency updates
- Affordable Care Act discussions with clients

Trainings

Behavioral Health Network

Self-Care & Work-Life Balance

Sonya O. Brown-Boyne, LMHC

- Strategies for maintaining work-life-play balance
  - Prioritizing rest
  - Prioritizing satisfaction
  - Utilizing support

Disease Case Management Network

Effectively Hosting/Creating Multidisciplinary Case Staffing

Dr. Andrea Levin, PharmD, BCACP

- Importance of Team Based Care
- How to implement Team Based Care
- Examples of interprofessional practice

Quality Network

Drilling Down Data & Quality Improvement Project Overview

CQM Support Staff

- Identifying modifiable factors
- Driver Diagram activity
- Developing aim statements
- Identifying process & outcome measures

Third Quarter Plans

Training

Medical Provider Network will have a training on CD4 Monitoring per Department of Health & Human Services guidelines.

Focus Group

Support Services Network participated in a focus group related to Ryan White Part A's Needs Assessment.

Case Studies

Networks will continue to present at meetings to enrich discussions.

Quality Improvement Projects

Quality Network will run multiple Plan-Do-Study-Act (PDSA) Cycles.

DISCUSSION

In preparation for Provider Appreciation Week FY2021, what topics do you think providers should explore?

Potential Topics Include:

- Innovating to Cater to Clients
- Multidisciplinary Teamwork
- Reaching Populations of Focus
- Client Satisfaction
- Peer Power Panel

HANDOUT C

Oral Health No-Show Tracking Project

Presented by Vanessa Oratien, MPH
Clinical Quality Management
September 20, 2021

GET CARE
BROWARD
TREAT HIV | BEAT HIV
RYAN WHITE | PART A

Presentation Contents

1. Project Overview
2. Tracking Process
3. Results
4. No-Show Project Recommendations
5. Discussion

Project Overview

In FY2019, the Oral Health Network of the Broward County Ryan White HIV/AIDS Part A Program discussed factors associated with client no-shows. Following the meeting, CQM Support Staff worked with the Network to create a formal tracking tool.

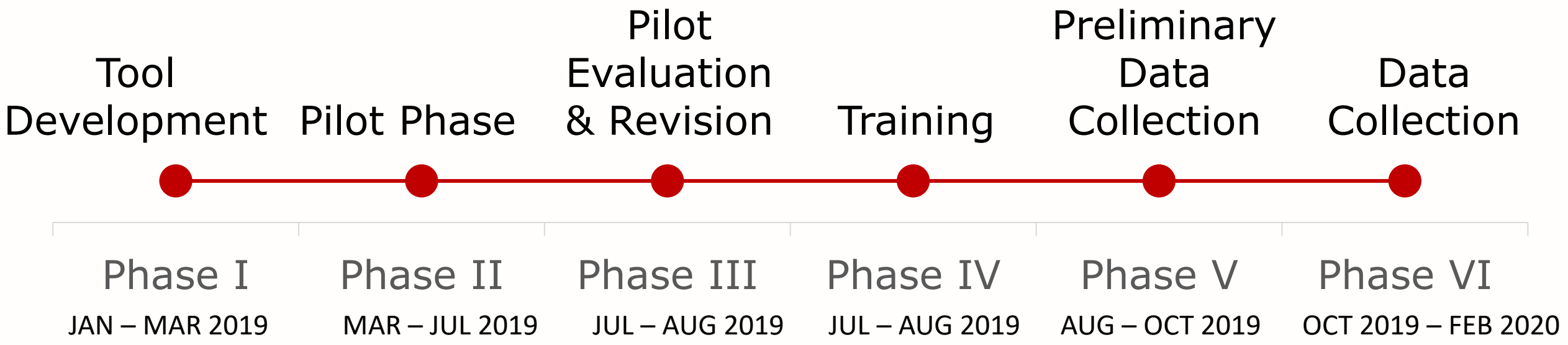
The no-show tracking tool was distributed to the Oral Health Network for the purpose of initiating a data-collection pilot study phase followed by re-evaluation and tracking tool modification.

Project Overview

Project Objectives:

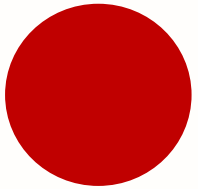
- Create a tool that tracks missed oral health appointments
- Identify factors associated with no-show behavior
- Identify self-reported reasons for no-show behavior
- Generate potential interventions to reduce no-show behavior

Tracking Process



Tracking Process

Tool Development

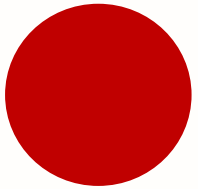


Phase I
January – March 2019

- In Phase I, CQM Support Staff worked with the Recipient team to determine the data fields that would be captured in the project.
- Both teams collaborated with Oral Health Network providers to define standardized criteria for "no-shows."
- Oral Health Network providers also worked with CQM Support Staff to select fields for the first version of the tracking tool.

Tracking Process

Pilot Phase

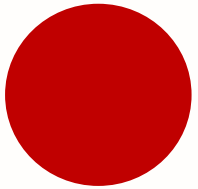


Phase II
March – July
2019

- In Phase II, the no-show tracking tool was distributed to the Oral Health Network to initiate a pilot data-collection period.
- Data were collected for roughly a month-and-a-half and submitted for analysis to the CQM Support Staff.

Tracking Process

Pilot Evaluation & Revision

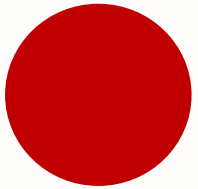


Phase III
July – August 2019

- In Phase III, CQM Support Staff queried the Oral Health Network regarding the successes and challenges during the pilot phase.
- CQM Support Staff reengineered the tracking tool based on observations made during the data collection pilot period. The newly revised tracking tool was approved by the oral health providers and the CQM Team.

Tracking Process

Training

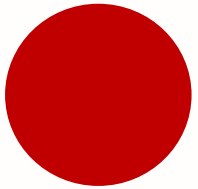


Phase IV
July – August
2019

- In Phase IV, CQM Support Staff provided in-person data collection trainings to five oral health clinic sites and provided resources to the provider teams on best practices in data collection.

Tracking Process

Preliminary Data Collection

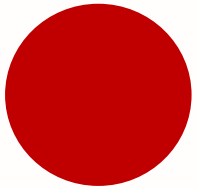


Phase V
August - October 2019

- In Phase V, the revised tracking tool was distributed to the Oral Health Network.
- CQM Support Staff proceeded with a two-month period of preliminary data collection to monitor data quality.
- Data submissions helped CQM Support Staff make additional modifications to clarify data collection efforts.
- After further revision, the staff created an accompanying data collection information guide.

Tracking Process

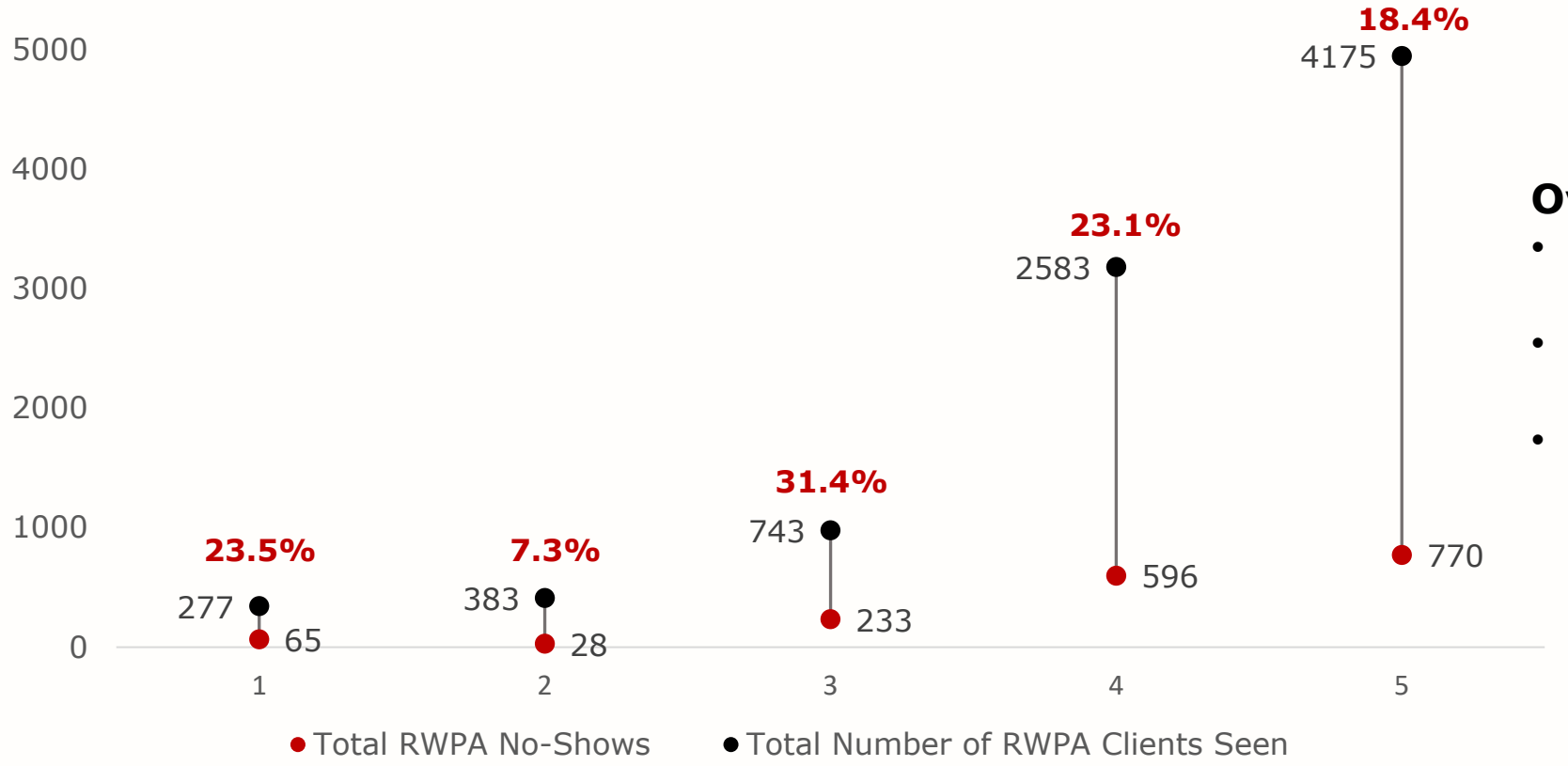
Data Collection



Phase VI
October – February
2019 2020

- In Phase VI, the final revised Oral Health No-Show tracking tool was distributed to the Oral Health Network.
- A formal data collection period was initiated at five oral health clinic sites.
- Part A clients with scheduled Oral Health appointments for initial visits, dental hygiene visits, and dental procedural visits and combined visits were monitored for appointment adherence.
- Clinic staff attempted to contact all clients who did not show for their appointments.

Results



Overall

- Total RWPA No-Shows: 1,692
- Total Number of RWPA Clients Seen: 8,161
- No-Show Rate: 20.7%

Results

Was the client successfully contacted to reschedule appointment within 72 hours of no-show?

Variable	Count	%
Yes	379	41.29%
No, Language barrier	3	0.33%
No, Client phone disconnected	97	10.57%
No, Client not responding to contact efforts	424	46.19%
No, Client moved/location unknown	14	1.53%
No, Client hospitalized	1	0.11%
Total	**918**	**100.0%**

Results

If appointment was rescheduled, when was the new appointment rescheduled for?

Variable	Count	%
Beyond 3 months of missed appointment	4	0.44%
N/A (no clinic contact)	549	59.93%
Next Day	22	2.40%
Within 2 months of missed appointment	38	4.15%
Within 2 weeks of missed appointment	78	8.52%
Within 3 months of missed appointment	13	1.42%
Within 3 weeks of missed appointment	42	4.59%
Within 1 month of missed appointment	82	8.95%
Within 1 week of missed appointment	88	9.61%
Total	**918**	**100.0%**

Results

Client reason for oral appointment no-show

Variable	Count	%
Incarcerated/Jail	1	0.11%
Client believed they no longer needed dental care	2	0.22%
Changed provider	3	0.33%
Transportation (personal transportation)	12	1.31%
Transportation (public transportation)	15	1.64%
Eligibility	19	2.08%
Illness or in-patient rehab facility	40	4.37%
Other scheduled commitments/work	110	12.02%
Forgot/misunderstanding	179	19.56%
N/A (no clinic contact)	534	58.36%
Total	**918**	**100.0%**

No-Show Project Recommendations

Clients choosing not to respond to provider contact may experience shame or anticipated penalty for the missed appointment upon contact with the provider.

Motivational Interviewing	Communication
Use of motivational interviewing techniques to encourage client behavior change toward appointment attendance.	Communication with clients on ways to cancel appointments so that appointments can be rescheduled in a timely & helpful manner.

No-Show Project Recommendations

Among clients who indicated “forgot or misunderstanding” upon contact after a missed appointment, provider scheduling processes & communication may be a potential cause.

Evaluation	Utilization	Partnership
Evaluation of the appointment scheduling process to identify areas that may prove challenging to clients.	Utilization of appointment reminder cards or other appointment reminder techniques.	Partnering with a client’s care team when receiving oral health services to further build support to assist the client in learning HIV self-management skills.

No-Show Project Recommendations

The second most reported reason for oral health appointment no-shows in this project was other scheduled commitments/ work.

Options	Education
Flexible scheduling options for clients, such as evenings or weekends.	Education regarding the short & long-term benefits of engaging in ongoing oral health care.

Discussion