HUMAN SERVICES DEPARTMENT
COMMUNITY PARTNERSHIPS DIVISION / Health Care Services Section
115 S Andrews Avenue, Room A300 • Fort Lauderdale, Florida 33301
954-357-5390 • FAX 954-357-5897

QUALITY NETWORK MEETING

Date: July 28th, 2021 at 9 AM – 10:15 AM
Location: WebEx Virtual Meeting Platform

Facilitator: Clinical Quality Management Staff
quality@brhpc.org
(954) 561-9681 ext. 1250

AGENDA

I. **Call to Order**
II. **Welcome/Introductions**
III. **Checkpoint 2 Check-in**
IV. **QI Toolkit Step 3: Aim Statements; Strategies and Quality Indicators**
V. **Announcements**
VI. **Adjournment**

Next Meeting Date: September 8th, 2021

HUMAN SERVICES DEPARTMENT
COMMUNITY PARTNERSHIPS DIVISION
115 S Andrews Avenue, Room A360 • Fort Lauderdale, Florida 33301 954-357-8647 • FAX 954-357-8204

QUALITY NETWORK MEETING

Date: June 16th, 2021 at 9:03 AM – 10:10 AM

Facilitator: Clinical Quality Management Staff

Location: WebEx Virtual Meeting Platform

quality@brhpc.org
(954) 561-9681 ext. 1343

MINUTES

PROVIDERS PRESENT
AHF: Amy Pinter, Billy Gall, Sandra Najuna
BCOM: Roseline Labissiere, Glynette Roberts
BRHPC: Natasha Markman
Broward Health: Diana Brown
Broward House: Gillian Cross Hogg
Care Resource: Robert Chavez, Ariel Williams
Community Rightful Center: Roseline LouisXVI, Wislene Augustin, Dr. Mary Hylor
Latinos Salud: Richard Ortiz
Legal Aid: Kara Schickowski
MHS: Alondra Machado
NSU: Kaitlin Mooney
Poverello: Santiago Barney

CQM & PCS SUPPORT STAFF: Vanessa Oratien, Jaclyn Ramos, Dr. Gritell Berkeley-Martinez, Tijee Williams, Debbie Cestaro-Seifer

PART A RECIPIENT STAFF: Kelsey Giglioli, Neil Walker**,** Timothy Thompson**,** Wismy Cius

I. Call to Order

The meeting was called to order at 9:03 am.

II. Welcome/Introductions

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

III. Checkpoint 1 Check-in

The Network discussed Checkpoint 1 submission with four agencies (BRHPC, Poverello, Nova, and AHF) providing feedback on their processes. BRHPC the CIED provider is currently reaching out to former clients and inquiring on whether they have remained in care and what challenges (if any) they have faced since being discharged. Poverello acknowledges that it has limitations with providing direct client care. However, by utilizing alerts from the PE software, the agency is incentivizing its clients to bring in their medical records with the goal of helping themselves update client records on PE software. This will also encourage clients to keep up with their care. Incentives may be provided in the form of gift cards and vouchers. CQM Support Staff advised the agency to try providing this incentive on a limited basis first to see if it is viable. Nova is offering health education videos in a combined effort with CIED with the goal of making this a long-term intervention.

IV. Data Drill Down

CQM Support Staff reviewed Data Drill Down by presenting data from Broward EMA HIV Continuum of Care Report for the 2020 fiscal year. The data was "drilled down" to demonstrate what to seek when developing FY2021 QIPs. By drilling down the viral load category data from Broward Ryan White Part A, CQM Support Staff identified and discussed an at-risk population less likely to receive viral load suppression than its counterparts: Non-Hispanic, Black MSM. Once this population was identified, the data was drilled down further to elaborate on the population's biopsychosocial factors.

V. Driver Diagram Activity

Network members participated in a Driver Diagram Activity facilitated by CQM Support Staff. CQM Support Staff provided this opportunity for agency representatives to implement what they learned from the Data Drill Down in this activity. A non-medical example was used (i.e. summer vacation) to encourage greater network feedback.

VI. Checkpoint 2 Overview

CQM Support Staff facilitated the Checkpoint 2 discussion by elaborating on what constitutes a modifiable and non-modifiable factor. Knowing this will help each agency create its own Driver Diagram, which will constitute Checkpoint 2. Checkpoint 2 is due on July 14, 2021. Network members are encouraged to reach out to CQM Support Staff for technical assistance.

VII. Announcements

- Agencies
    - None
- Recipient Staff

- Notice of Funding Opportunity (NOFO)
    i. The Annual Ryan White Part A Grant Application is now open and due in October.
    ii. This is the last year the application will be due annually. The next grant application cycle will begin in 3 years.
- Community Engagement
    i. Saturday (6/19/21): The Recipient will be tabling at Stonewall Pride Parade
    ii. Saturday (6/26/21): The Recipient will be tabling at the African-American Research Library in honor of National HIV Testing Day.

- CQM & PCS Support Staff
    - Network members were encouraged to complete the Assessment of the Administrative Mechanism survey. The HIVPC is required to complete an annual assessment of the Recipient's efficiency in meeting the needs of people with HIV. Agencies are asked to complete a survey to enrich available data and provide a better understanding of the Recipient's ability to carry out its responsibilities. For more information, please contact PCS Support Staff at hivpc@brhpc.org.

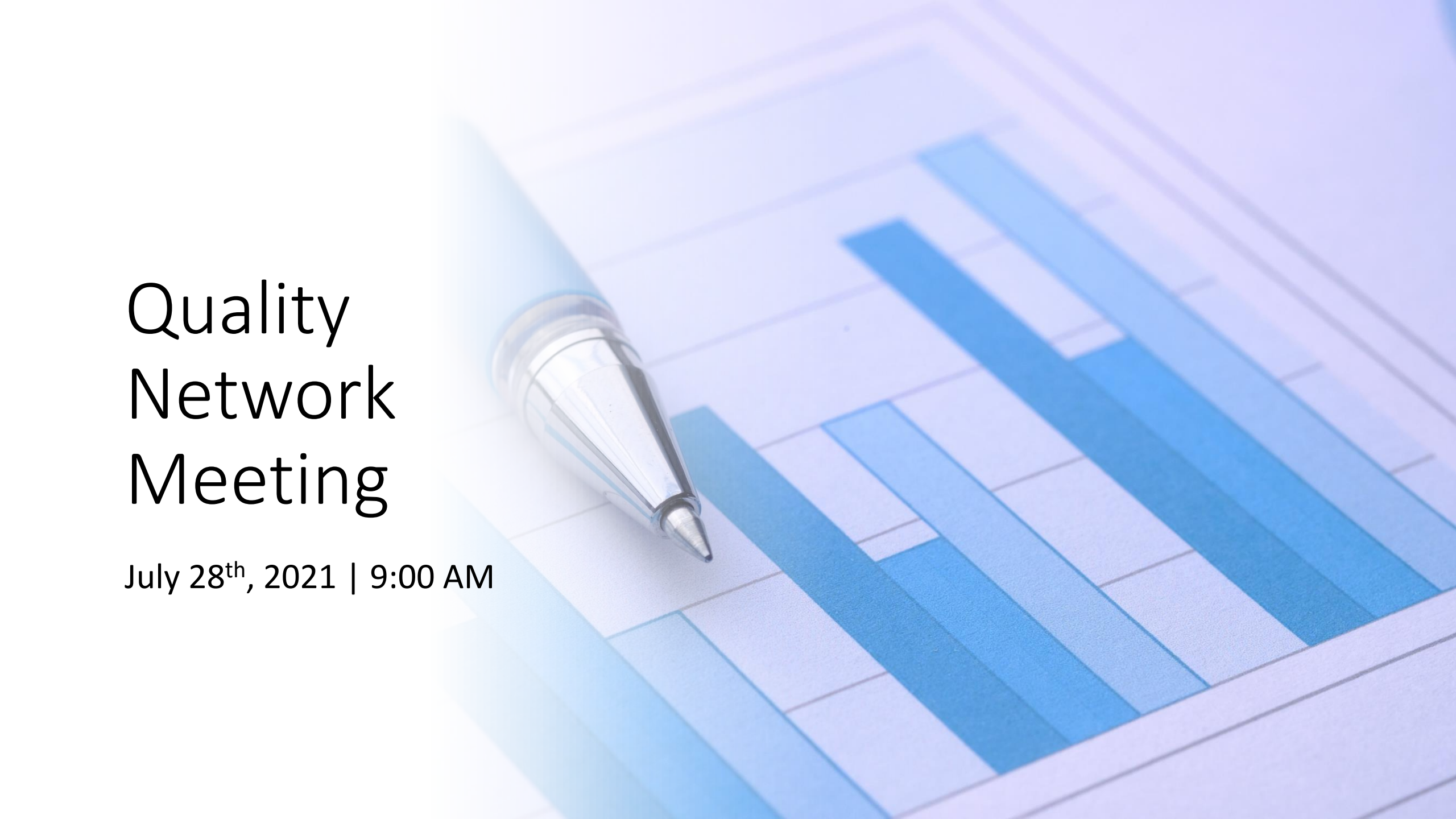
VIII. Adjournment

The meeting was adjourned at 10:10 am.

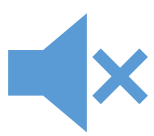
Next Meeting Date: July 28th, 2021

Quality Network Meeting

July 28th, 2021 | 9:00 AM



Housekeeping Rules



Mute Microphone

Participants will be automatically muted to limit background noise

Identify Yourself

State your name and agency when speaking

Use the Chat Box

Type in the chat box to identify yourself and agency, ask questions, and request additional clarification

Raise Your Hand

The “raise hand” option will notify the presenter of any questions that may arise

Ask Questions

Please save questions until the end of each slide

Welcome & Introductions

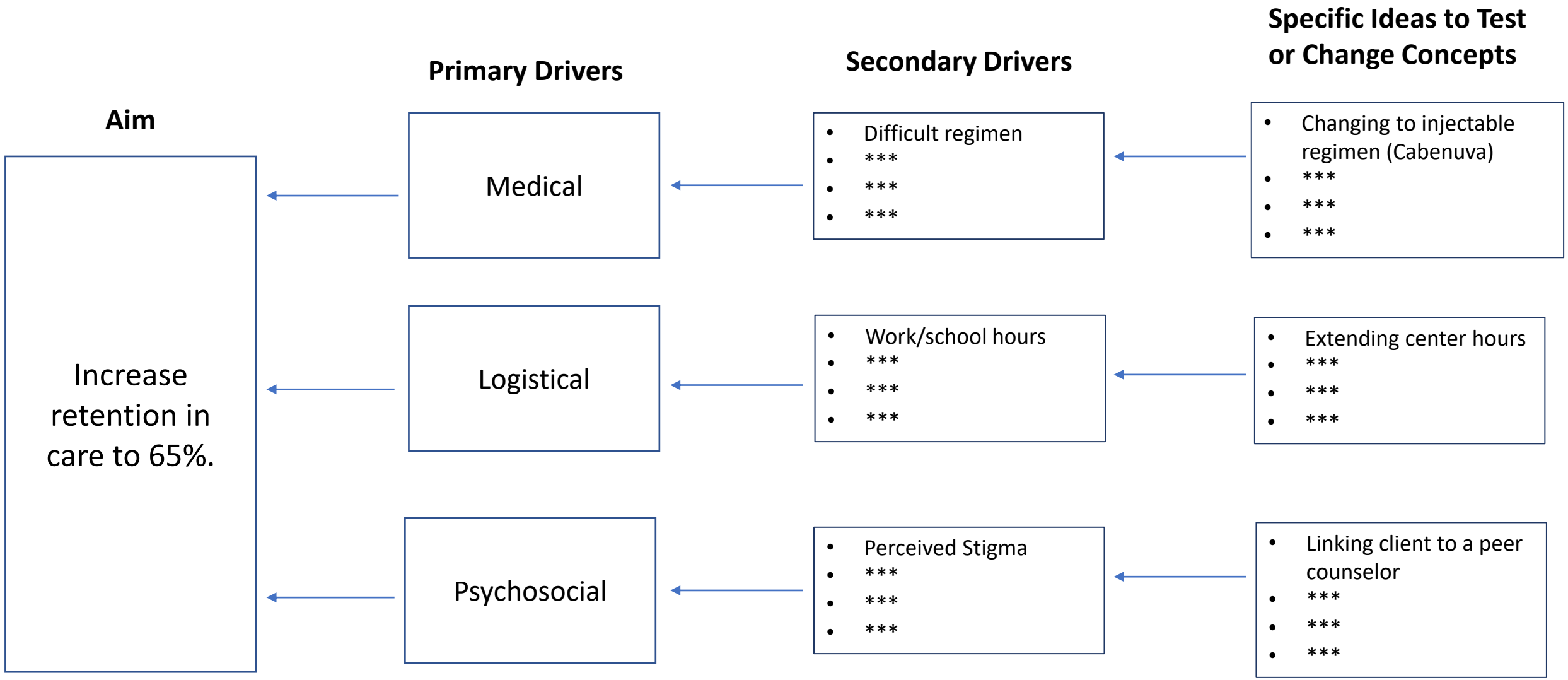
Checkpoint Check-in

- Case study format
- Review Checkpoint 2
  - Driver Diagram Activity
- Introduce Checkpoints 3 and 4
  - Aim Statement and Drivers/Contributing Factors Activities

Case Study: Our Community Health Center

Our Community Health Center is a non-profit agency in Broward County that serves people with HIV. This agency offers disease case management and non-medical case management services. *Our Community Health Center* services a total of 150 clients, however 50% of clients are not retained in care. After drilling-down data, the quality management team identifies the affected population: clients aged 18-28 years. Recognizing the seriousness of this issue, the quality management team at *Our Community Health Center* contacts the Quality Network for technical assistance with developing a QIP to improve their retention in care rates.

1. Assist the QM team at *Our Community Health Center* with completing a driver diagram.



2. Assist the quality management team at *Our Community Health Center* with developing an aim statement. Aims should be SMART, specific, clear, and describe the target population, desired improvement, and targeted timeframe. Use the following table to put together your aim statement.

To increase/decrease		**(process/outcome)**
from		**(baseline%, rate, #, etc.)**
to		**(goal/target%, rate, #, etc.)**
by		**(date)**
in		**(group, population)**
Full Aim Statement:		

Tips for Setting Aims

- Clearly define your aim
- Include numerical goals that require a fundamental change to the system
- Set stretch goals
- Avoid aim drift
- Be prepared to refocus the aim

Polling Question

Which of the following is a complete aim statement?

a) To increase retention in care from 50% to 65%.

b) To increase retention in care by February 28, 2022 in adults aged 18-28 years.

c) To increase retention in care from 50% to 65% in adults aged 18-28 years.

d) To increase retention in care from 50% to 65% by February 28, 2022 in adults aged 18-28 years.

3. Assist the quality management team at *Our Community Health Center* with completing the following table. List the main driver/factors that contribute to the outcome you want to change.

Driver/Contributing Factors: List the main drivers/factors that contribute to the outcome you want to change.	**Change Idea:** What do you plan to do to address the driver/contributing factor?	**Process Measure:** How can you measure that your change idea is taking place?	**Outcome Measure(s):** How can you measure if your change idea worked?
Difficult ART Regimen	Recommend Cabenuva	Client completes watching a 3- minute video on Cabenuva, followed by a 12-minute MI session with a trained staff member discussing engagement in care and viral suppression/U=U	(1) Client attends psycho-education session (2) Client provides a rating of 7 or above on a 10-point rating scale indicating their intention to attend a 15-minute follow-up appointment (virtual or in-person) (3) Client attends follow-up session
Lack of Support	Peer Counseling	Client is introduced to a peer advocate and completes three 30-minute sessions over the course of six weeks focused on HIV self-management and wellbeing.	Attendance at three 30-minute peer sessions over a six-week period.

Quality Measurement

- A ***quality measure*** is a tool to assess specific aspects of care and services that are linked to better health outcomes while being consistent with current professional knowledge and meeting client needs.
  - ***Process measures*** – evaluate the actions taken to produce the outcome and the procedures for achieving the best outcomes.
  - ***Outcome measures*** – measure the results; outcome indicators are used to evaluate if you met your goal.

QI TOOLKIT

FY2021-2022

RESOURCE GUIDE FOR BROWARD COUNTY RYAN WHITE PART A QUALITY NETWORK PROVIDERS

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

TABLE OF CONTENTS

Checkpoints

- ☐ Checkpoint 1: Identify Focus Areas for Quality Improvement Projects (Step 1)
- ☐ Checkpoint 2: Driver Diagram (Step 2)
- ☐ Checkpoint 3: AIM Statement (Step 3)
- ☐ Checkpoint 4: Drivers/ Contributing Factors (Step 3)
- ☐ Checkpoint 5: PDSA Cycle Planning Form (Step 4)
- ☐ Checkpoint 6: Preliminary Data Review (Step 5)
- ☐ Checkpoint 7: Writing the QI Summary Report (Step 6)
- ☐ Checkpoint 8: QIP Poster (Step 7)

Step 3 Next Steps

Checkpoint 3 due date:

August 25th, 2021

Checkpoint 4 due date:

August 27th, 2021

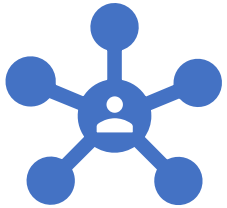
Technical Assistance:

As needed

Announcements

Quality Network Evaluation Survey

3-minute required survey



If you are part of multiple networks, you will complete a separate evaluation for each network

The data collected will be used to inform future meeting discussion and training topics.

Next Meeting Date:

September 8th, 2021