



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: May 5th, 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**
Name: Roseline LouisXVI, Program Director
Agency: Community Rightful Center
Email: RLouisXVI@communityrightfulcenter.org
- III. **Continuum of Care Three-Year Data Overview**
- IV. **QIP Toolkit Refresher**
- V. **Discussion: Client Satisfaction Surveying Process**
- VI. **Discussion: COVID-19 Vaccine**
- VII. **Announcements**
- VIII. **Adjournment**

Next Meeting Date: June 16th, 2021

Broward County Board of County Commissioners
Mark D. Bogen • Beam Furr • Steve Geller • Dale V.C. Holness • Chip LaMarca • Nan H. Rich • Tim Ryan • Barbara Sharief • Michael Udine
Broward.org





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QUALITY NETWORK MEETING

Date: March 24th, 2021 at 9:05AM – 9:50 AM

Facilitator: Clinical Quality Management Staff

Location: WebEx Virtual Meeting Platform

quality@brhpc.org
(954) 561-9681 ext. 1250

MINUTES

PROVIDERS PRESENT

Sandra Najuna, AHF
Billy Gall, AHF
Glynette Roberts, BCFHC
Natasha Markman, BRHPC
Diana Brown, Broward Health
Gillian Cross, Broward House
Robert Chavez, Care Resource
Ariel Williams, Care Resource
Kara Schickowski, Legal Aid
Kaitlin Mooney, NSU
Richard Ortiz, Latinos Salud
Yamil Cruz, Latinos Salud

**CLINICAL QUALITY
MANAGEMENT (CQM)
SUPPORT STAFF**

Vanessa Oratien
Whitney Saint-Fleur

PART A RECIPIENT STAFF
Neil Walker

GUESTS

Florence Ukpai, HIVPC
Gritell Martinez, HIVPC
Debbie Cestaro-Seifer, CQM Consultant

I. Call to Order

The meeting was called to order at 9:05 am.

II. Welcome/Introductions

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

III. Quality Network Meeting Evaluation Results

Broward County Board of County Commissioners
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Broward.org



CQM Support Staff presented the Quality Meeting Network Evaluation results from the survey that was launched in February 2021. The total number of responses received were 14. Following the presentation network members suggested implementing quarterly updates among agencies in the network (i.e. changes in staff, new programs, relocations, etc.).

IV. Quality Improvement Overview

CQM Support Staff provided an overview of quality improvement and stated the Broward EMA Ryan White Part A Program goal for FY 21-22: Closing the Gap between Linkage and Retention in Care.

V. Data Analysis Refresher

CQM Support Staff provided an overview of how to drill down data.

VI. Discussion: COVID-19 Vaccine

CQM Support Staff facilitated a discussion on COVID-19 vaccine hesitancy, confidence, and challenges.

- BRHPC – There has been an increase in the number of clients who are seeking the vaccine. More confidence has also been observed compared to one month ago. Observed barriers include online appointment requests and wait times.
- Care Resource – Ran out of vaccine allotment and provided letters to clients to receive the vaccine in the community.
- BCFHC – More clients have been vaccinated but the agency is running out of their vaccine allotment. Some clients remain hesitant regarding vaccination and have asked if staff members have received the vaccine. The agency has also hosted COVID-19 events for drive up vaccinations.
- NSU – COVID-19 screenings continue. Many clients have been vaccinated, have appointments scheduled to receive the vaccine, or are hesitant about receiving the vaccine.
- Latinos Salud – Clients have been showing confidence in receiving the vaccine; some have brought in their vaccination cards to be added to their client files. Some clients have reported that they have received the vaccine at AHF. The agency is currently working on getting the vaccine for distribution and has purchased a freezer to store the vaccine. Vaccine hesitancy remains an issue. Medical staff has also demonstrated hesitancy towards obtaining the vaccine and have raised privacy concerns.
- The CQM Program Consultant highlighted the inequalities for clients who are not tech savvy and suggested using iPads at agencies to register clients for vaccine registrations as a QIP.

VII. Announcements

- Agencies
 - Latinos Salud – Moving to a new and larger location in Wilton Manors

- BCFHC – Moving to a new and larger location; in the same building in Lauderhill but one floor above their previous location.
- Recipient Staff – Vaccination Campaign is in progress. Written and video testimonials will be incorporated into the campaign.
- CQM Support Staff – Certificates will be mailed to the agencies soon. Support Staff will be reaching out to the agencies to confirm mailing addresses.

VIII. Adjournment

The meeting was adjourned at 9:50 am.

Next Meeting Date: May 5th, 2021

Quality Network Meeting

May 5th, 2021

9:00 – 10:15 AM

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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

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Welcome & Introductions

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Welcome!

Roseline LouisXVI
Program Director
Community Rightful Center, Inc.



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HIV Care Continuum Data Overview

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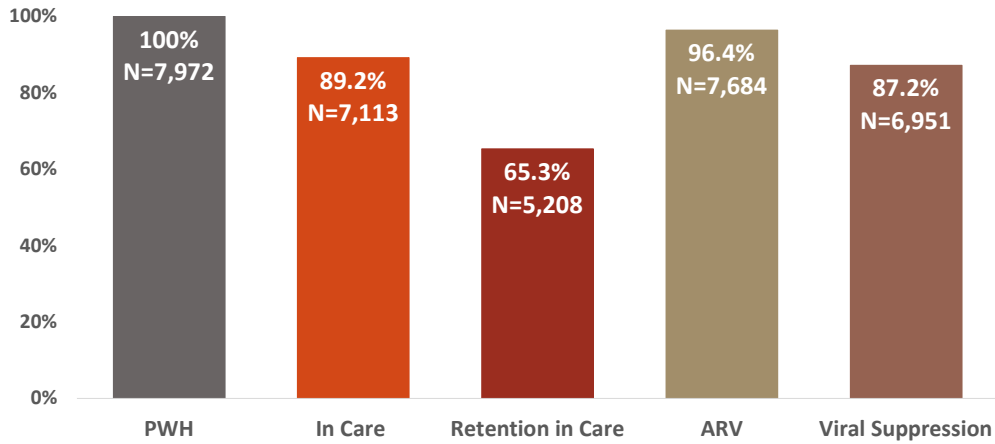
HIV CARE CONTINUUM DEFINITIONS

- **People with HIV (PWH):** Clients who have HIV and received at least one service from the selected service category(s) in the reporting period.
- **Ever in Care:** PWH who ever had a medical care service documented.
- **In Care:** PWH who had a medical care service within the reporting period.
- **Retention in Care:** PWH who had two or more medical care services at least three months apart in the reporting period.
- **On Antiretroviral Therapy (ART):** PWH who have a documented ART at any time during the reporting period within HIV history records.
- **Virally Suppressed:** PWH with most recent viral load less than 200 copies/mL, as of end of the reporting period.

*Medical Care Service: Documented viral load or CD4 lab, medical visit, prescription filled and paid by Ryan White, or payment requests for co-pays made by HICP.

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Broward Part A HIV Care Continuum FY 2020-2021

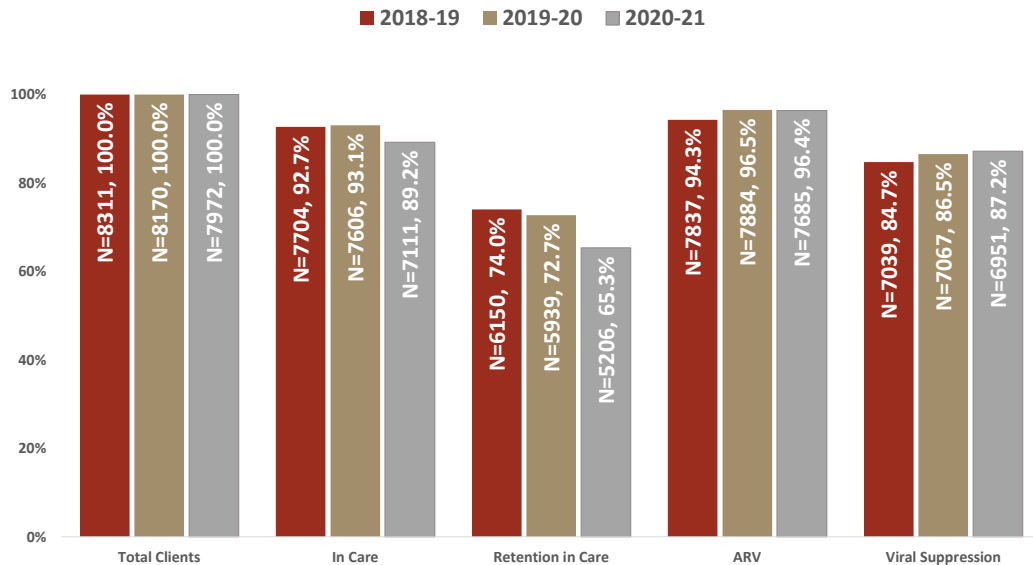


- A total of 7,972 clients are included in the in the HIV Care Continuum for FY2020-2021
- Viral Suppression is 87.2%
 - Most recent FL-DOH data (2019) report 68.5% viral suppression Broward County (RW and non-RW clients)

Data Sources: Continuum of HIV Care, 2020; Broward EMA HIV Continuum of Care Report (3/01/2020-2/28/2021); Broward County, FL-HIV EPIDEMIOLOGICAL PROFILE, EMA 0010

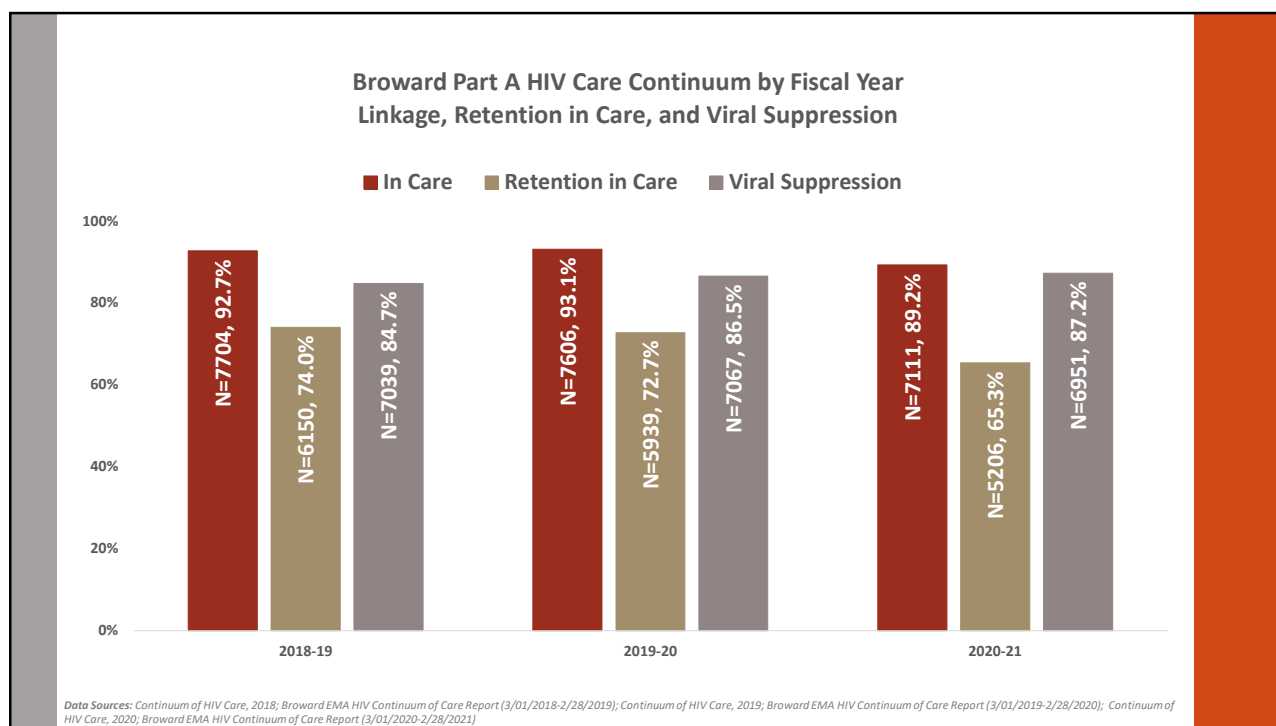
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Broward Part A HIV Care Continuum by Fiscal Year

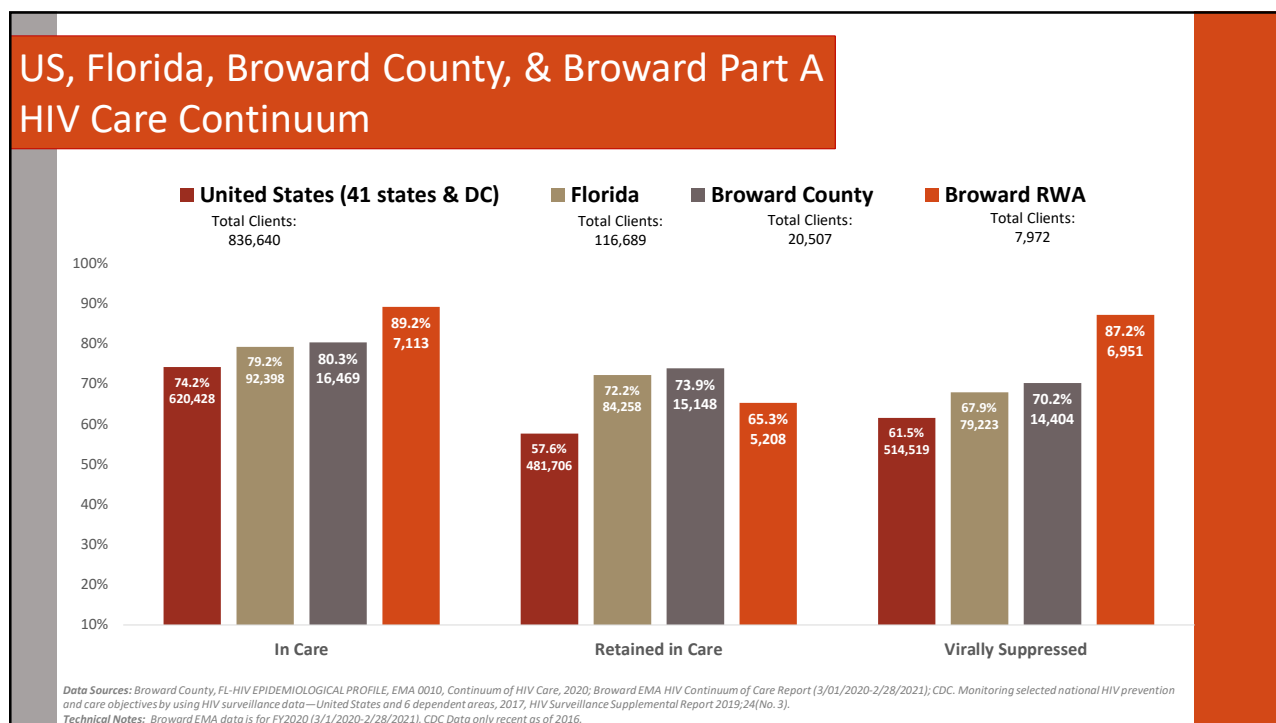


Data Sources: Continuum of HIV Care, 2018; Broward EMA HIV Continuum of Care Report (3/01/2018-2/28/2019); Continuum of HIV Care, 2019; Broward EMA HIV Continuum of Care Report (3/01/2019-2/28/2020); Continuum of HIV Care, 2020; Broward EMA HIV Continuum of Care Report (3/01/2020-2/28/2021)

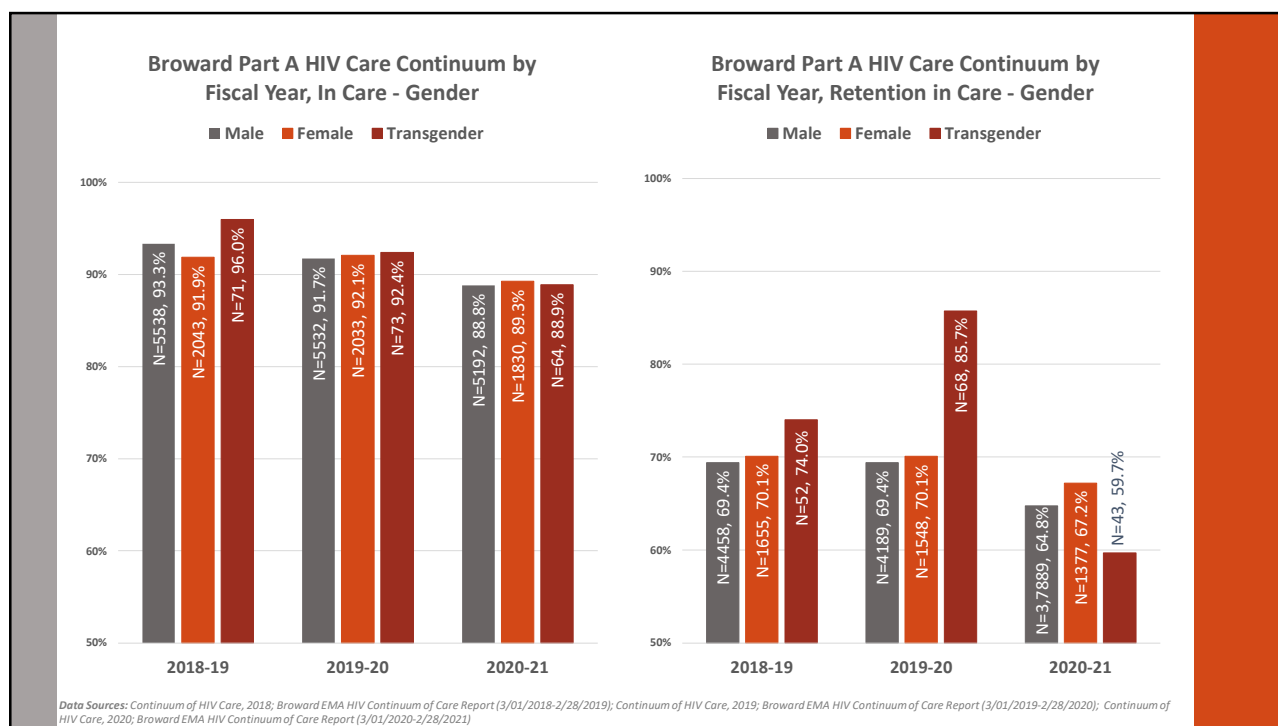
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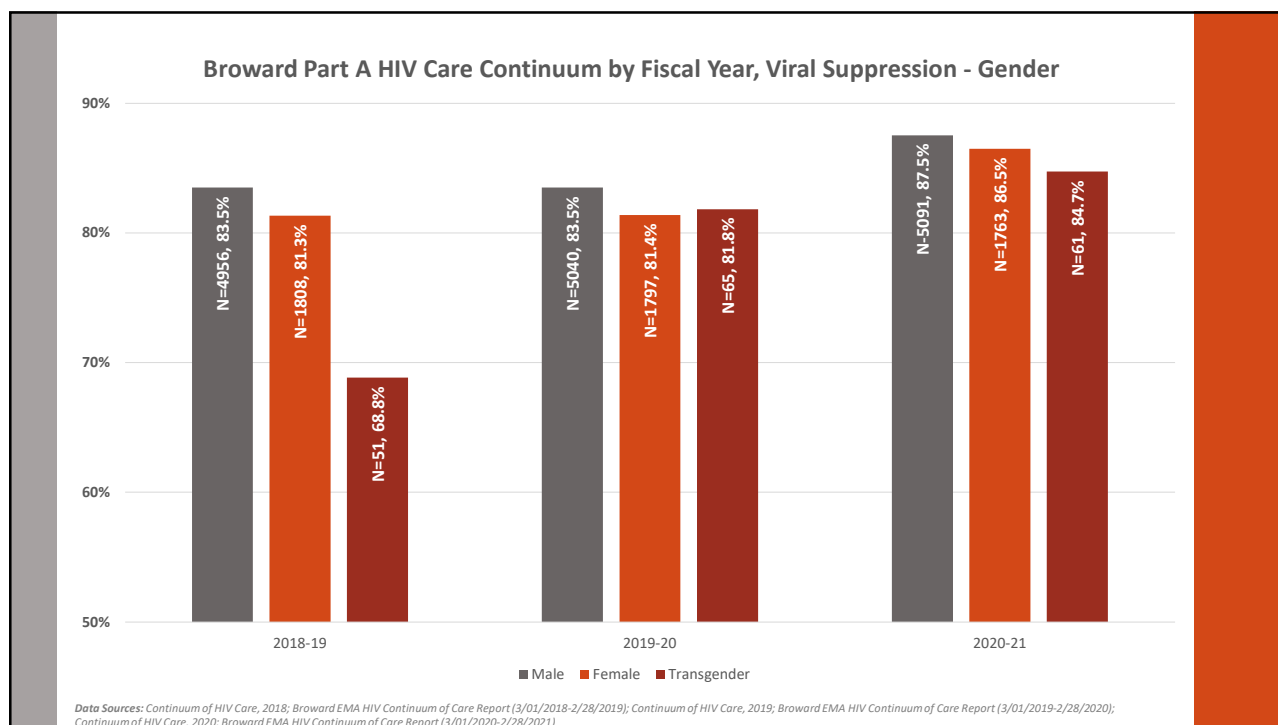
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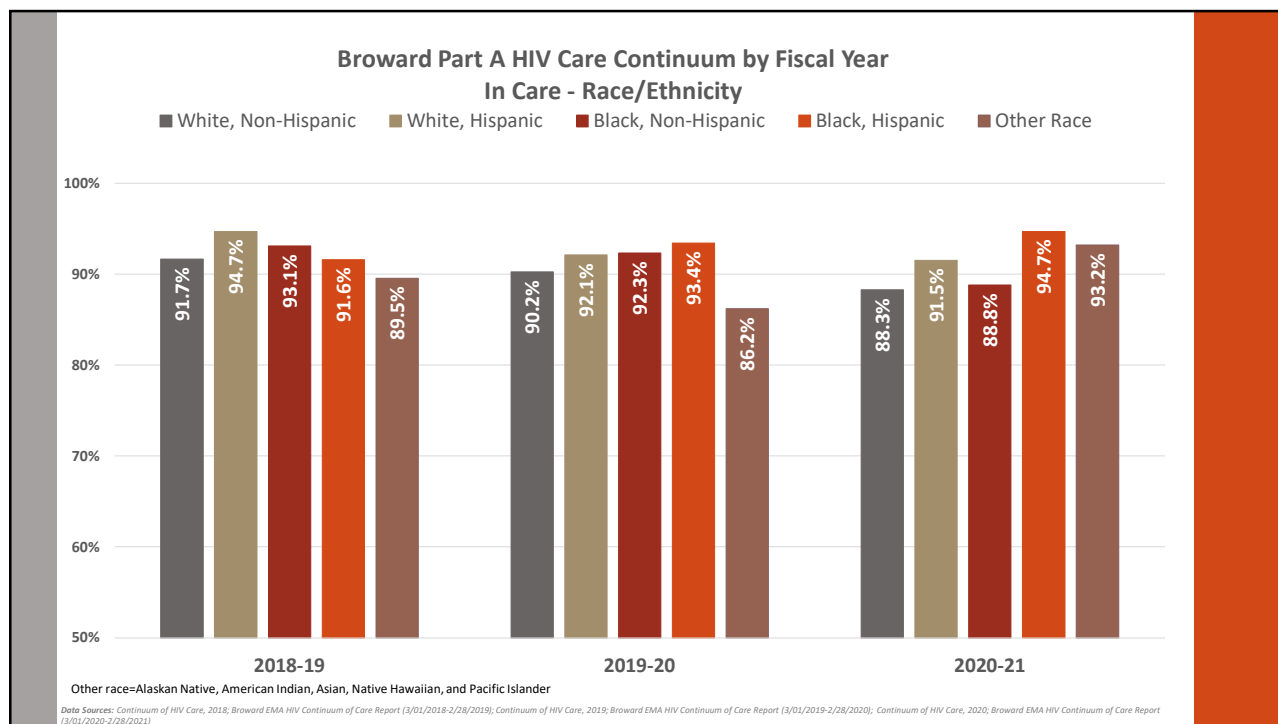
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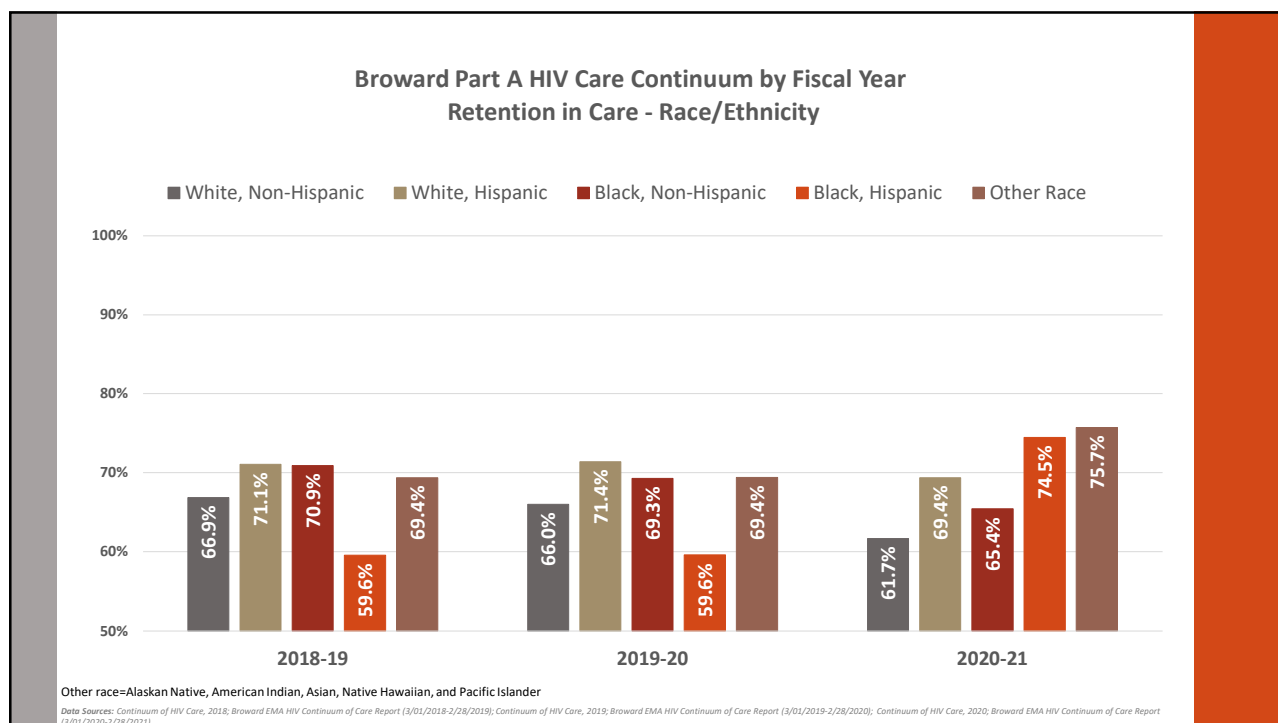
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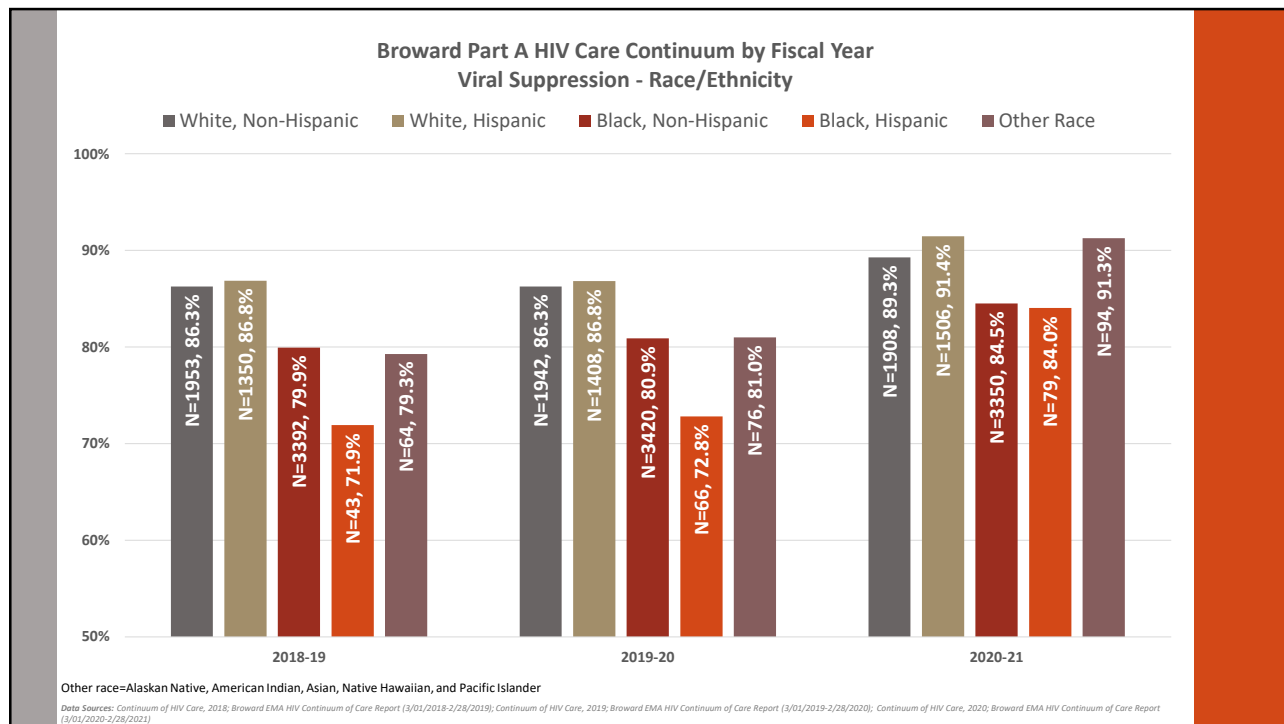
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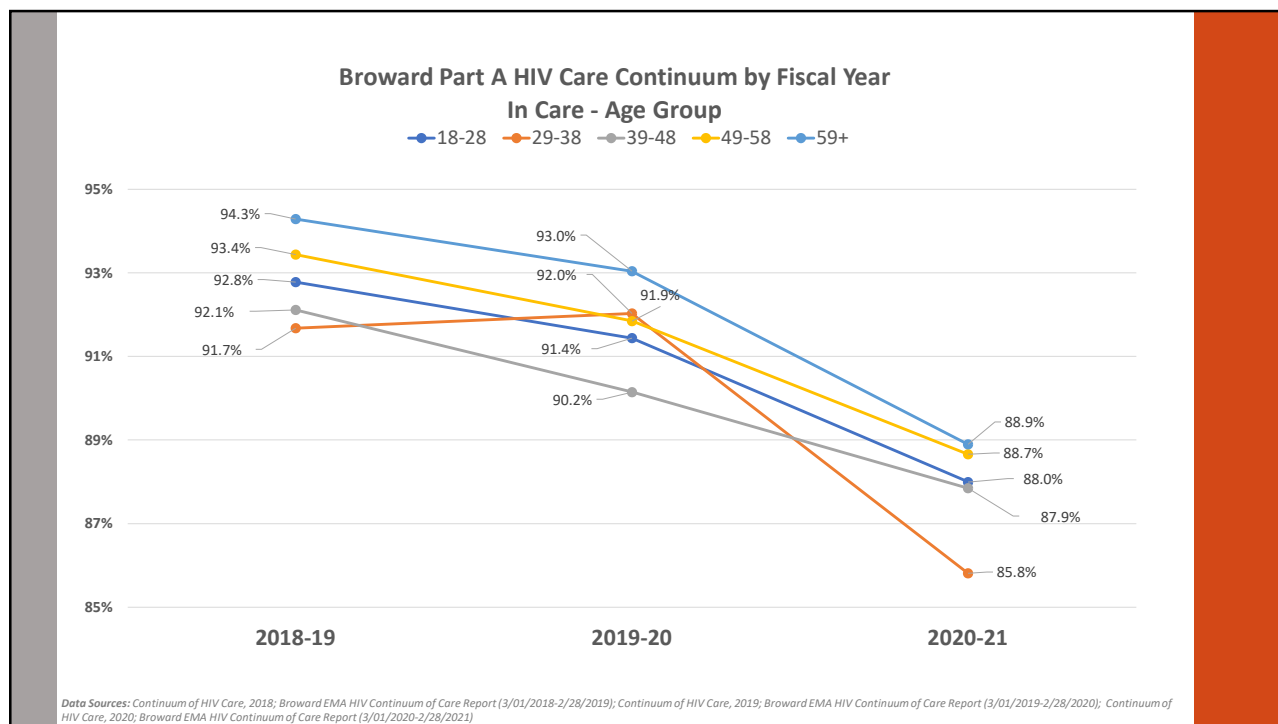
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Broward Part A HIV Care Continuum, Linkage and Retention in Care by Race/Ethnicity

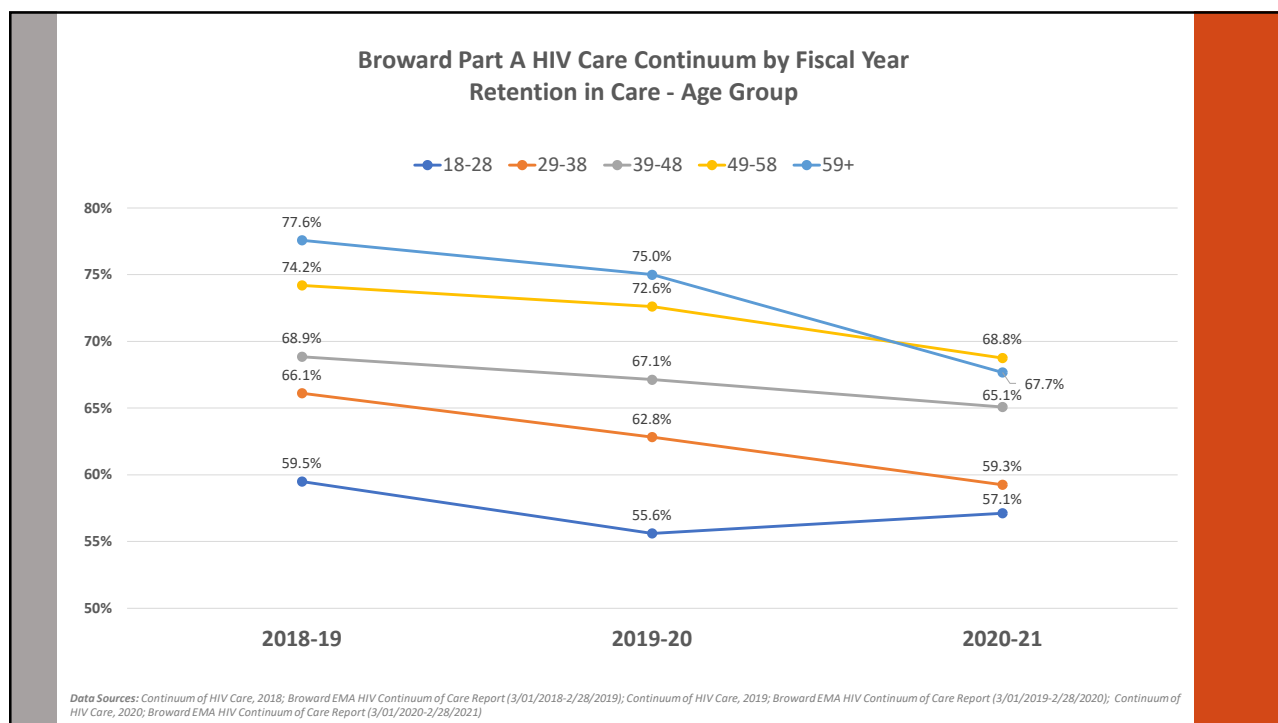
		2018		2019		2020	
		In Care	Retention	In Care	Retention	In Care	Retention
White, non-Hispanic	N	2074	1513	2030	1485	1886	1319
	%	91.7	66.9	90.2	66.0	88.3	61.7
White, Hispanic	N	1473	1106	1495	1159	1508	1144
	%	94.7	71.1	92.1	71.4	91.5	69.4
Black, non-Hispanic	N	3951	3010	3902	2929	3521	2593
	%	93.1	70.9	92.3	69.3	88.8	65.4
Black, Hispanic	N	76	50	85	54	89	70
	%	91.6	59.6	93.4	59.6	94.7	74.5
Other	N	77	60	81	65	96	78
	%	89.5	69.4	86.2	69.4	93.2	75.7

Data Sources: Continuum of HIV Care, 2018; Broward EMA HIV Continuum of Care Report (3/01/2018-2/28/2019); Continuum of HIV Care, 2019; Broward EMA HIV Continuum of Care Report (3/01/2019-2/28/2020); Continuum of HIV Care, 2020; Broward EMA HIV Continuum of Care Report (3/01/2020-2/28/2021)

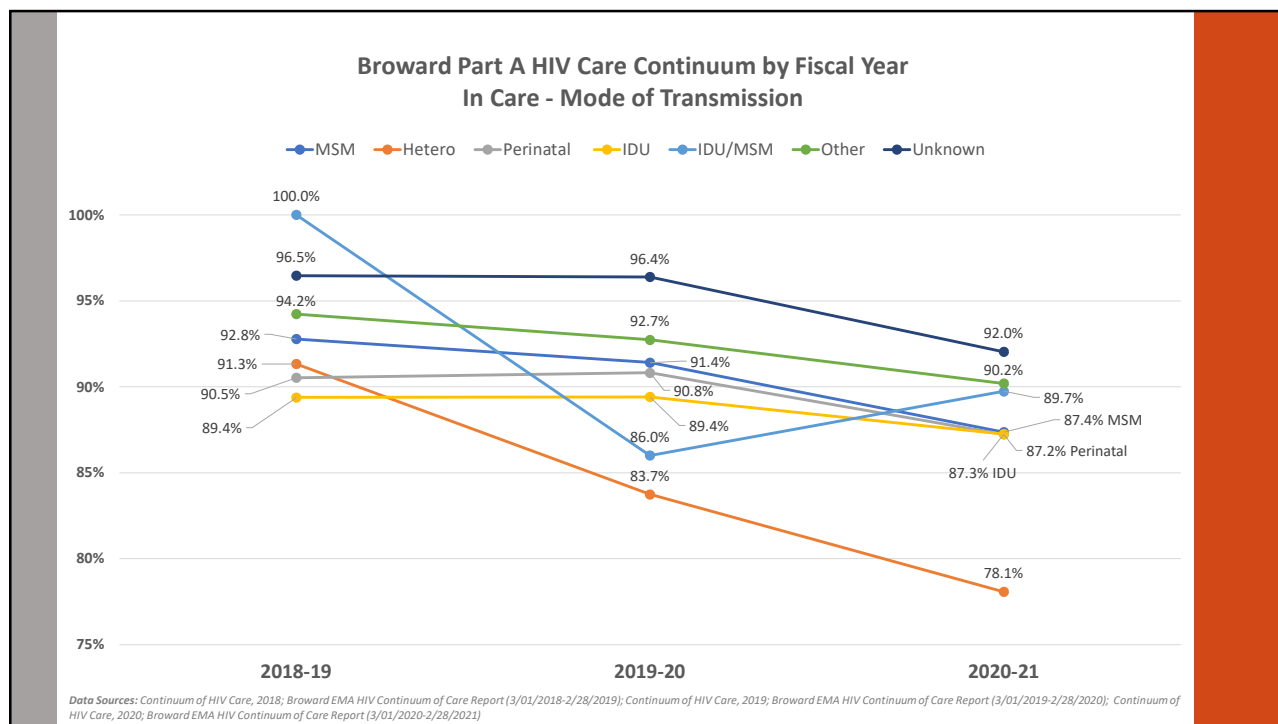
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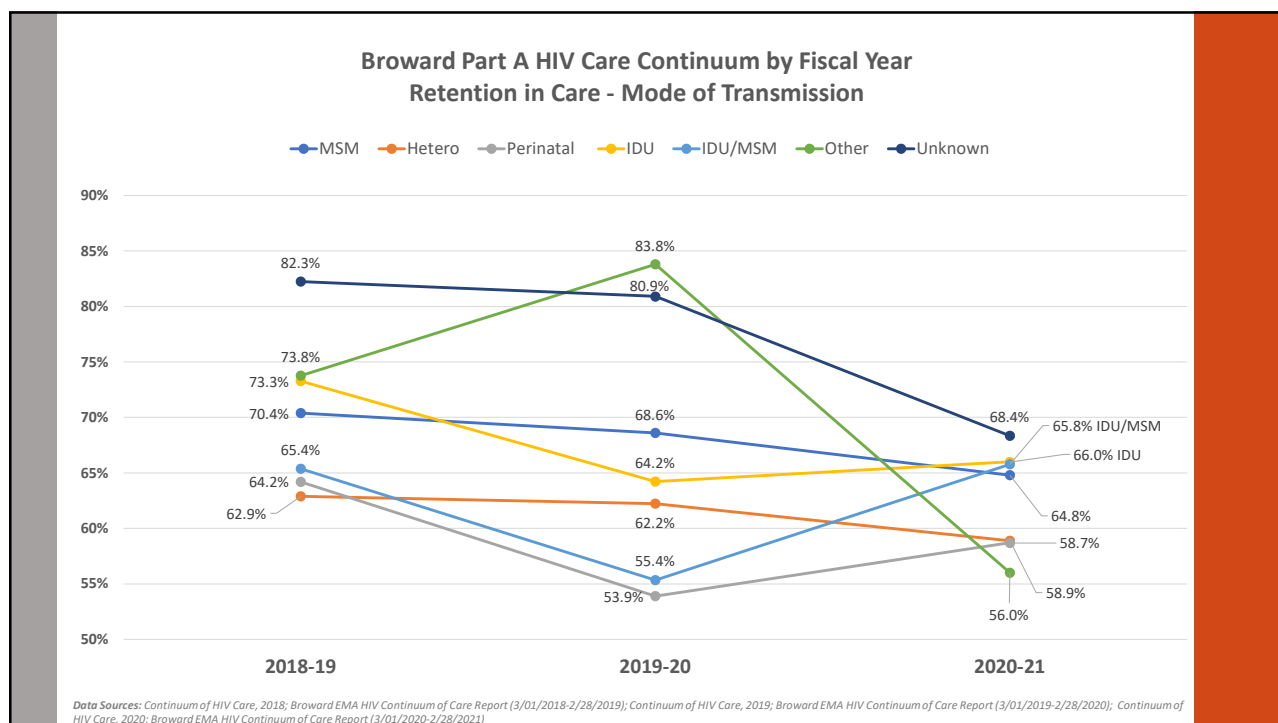
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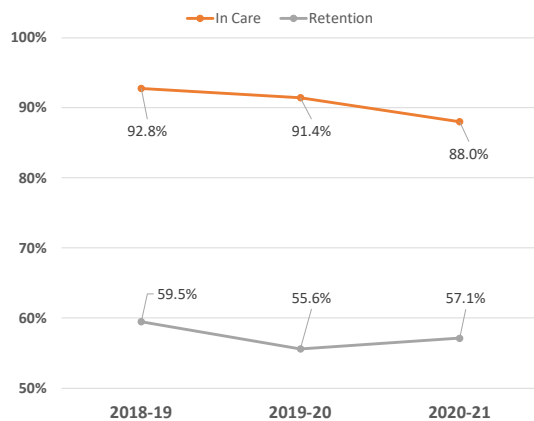
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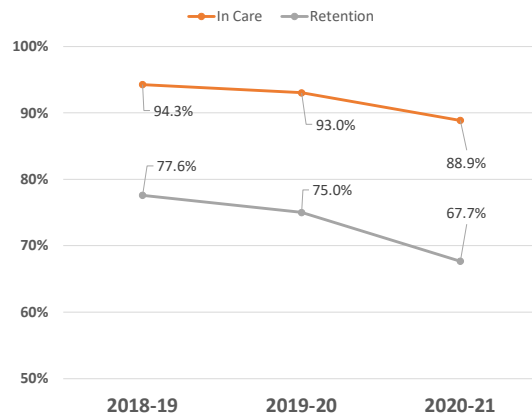
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Special Populations

Broward Part A HIV Care Continuum by Fiscal Year, Linkage and Retention in Care – Age Group 18-28



Broward Part A HIV Care Continuum by Fiscal Year, Linkage and Retention in Care – Age Group 59+

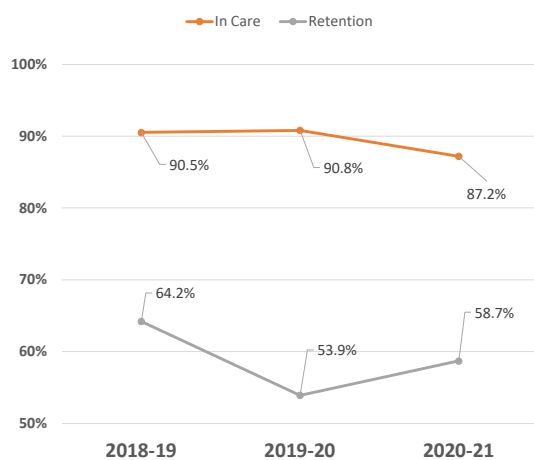


Data Sources: Continuum of HIV Care, 2018; Broward EMA HIV Continuum of Care Report (3/01/2018-2/28/2019); Continuum of HIV Care, 2019; Broward EMA HIV Continuum of Care Report (3/01/2019-2/28/2020); Continuum of HIV Care, 2020; Broward EMA HIV Continuum of Care Report (3/01/2020-2/28/2021)

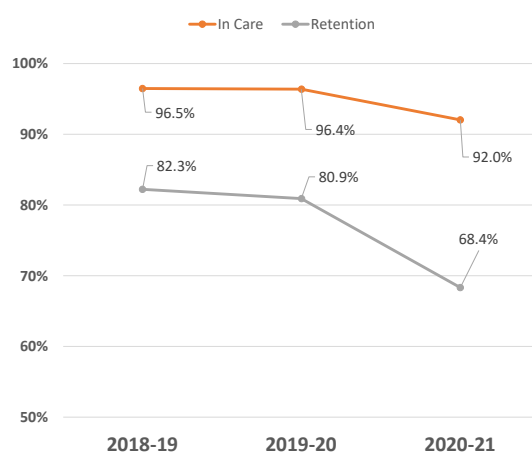
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Special Populations

Broward Part A HIV Care Continuum by Fiscal Year, Linkage and Retention in Care – Perinatal Transmission



Broward Part A HIV Care Continuum by Fiscal Year, Linkage and Retention in Care – Unknown Transmission



Data Sources: Continuum of HIV Care, 2018; Broward EMA HIV Continuum of Care Report (3/01/2018-2/28/2019); Continuum of HIV Care, 2019; Broward EMA HIV Continuum of Care Report (3/01/2019-2/28/2020); Continuum of HIV Care, 2020; Broward EMA HIV Continuum of Care Report (3/01/2020-2/28/2021)

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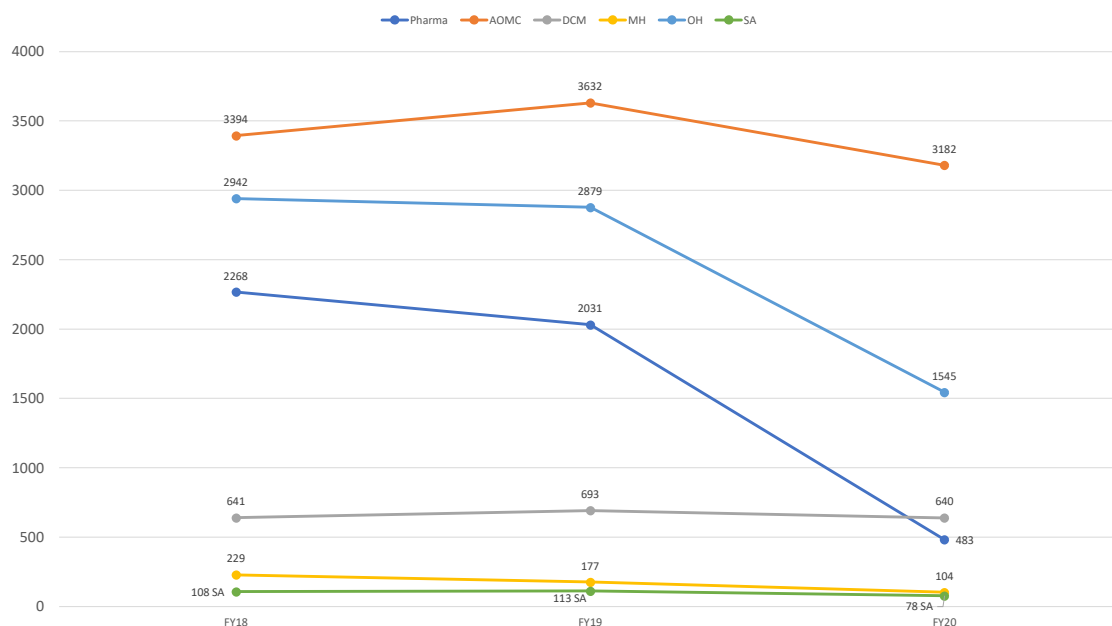
Broward Part A HIV Care Continuum Notable Trends

- Transgender clients (N=72) had the largest gap (29.2%) among all genders between linkage and retention in care for FY2020; this does not indicate a disparity.
- White non-Hispanics (N=2137) had the largest gap (26.6%) among all races between linkage and retention in care for FY2020, whereas Other races* (N=103) had the smallest gap (17.5%) between linkage and retention in care.
- Age group 18-28 had the largest gap (30.9%) among all age groups between linkage and retention in care for FY2020, whereas age group 59+ had the smallest gap (21.2%) between linkage and retention in care.
- Perinatal transmission (N=92) had the largest gap (28.5%) among all modes of transmission between linkage and retention in care for FY2020, whereas unknown transmission had the smallest gap (23.6%) between linkage and retention in care.
- Potential causes for gaps between linkage and retention in care:
 - Impact of the COVID-19 pandemic.
 - Part A and ADAP approving 60-day refills on medications.
 - ADAP suspending the requirement of clients needing updated viral load and CD4 labs to get their medications. Clients not considered retained in care, but they are still on ART.
 - Small number of total clients (Transgender, Other race, and Perinatal mode of transmission).

*Other races = Alaskan Native, American Indian, Asian, Native Hawaiian, and Pacific Islander

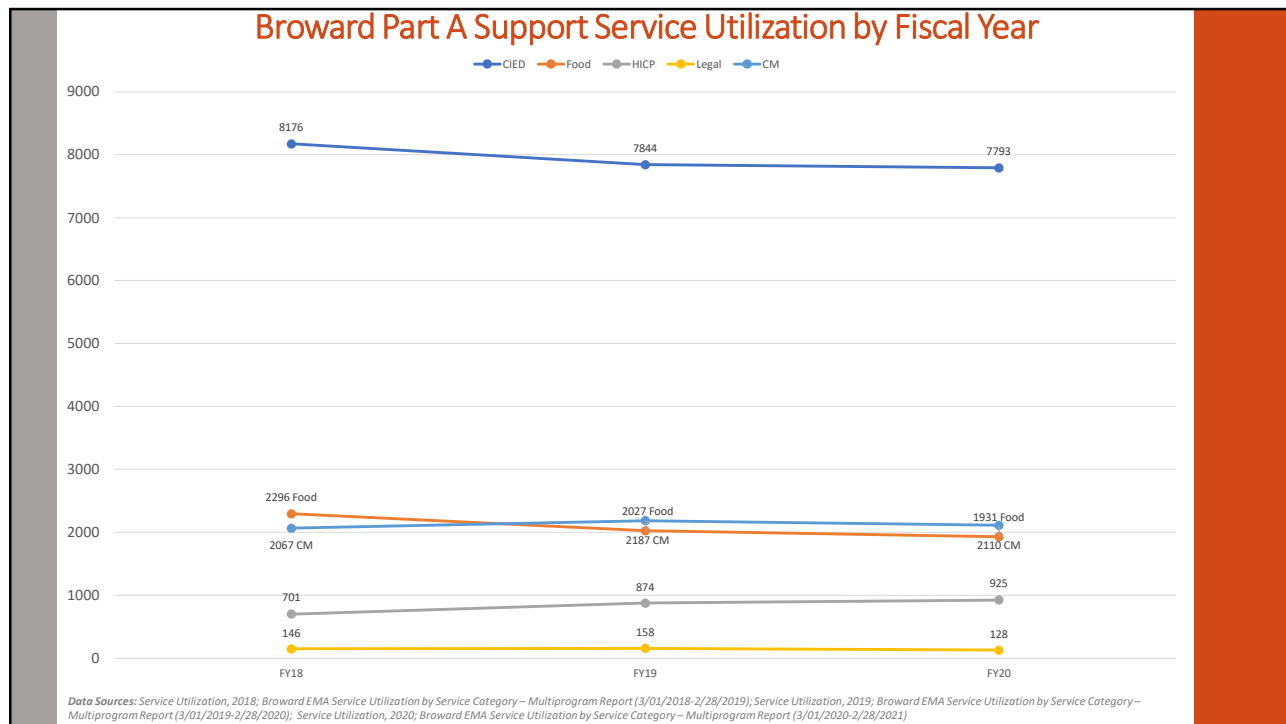
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Broward Part A Clinical Service Utilization by Fiscal Year

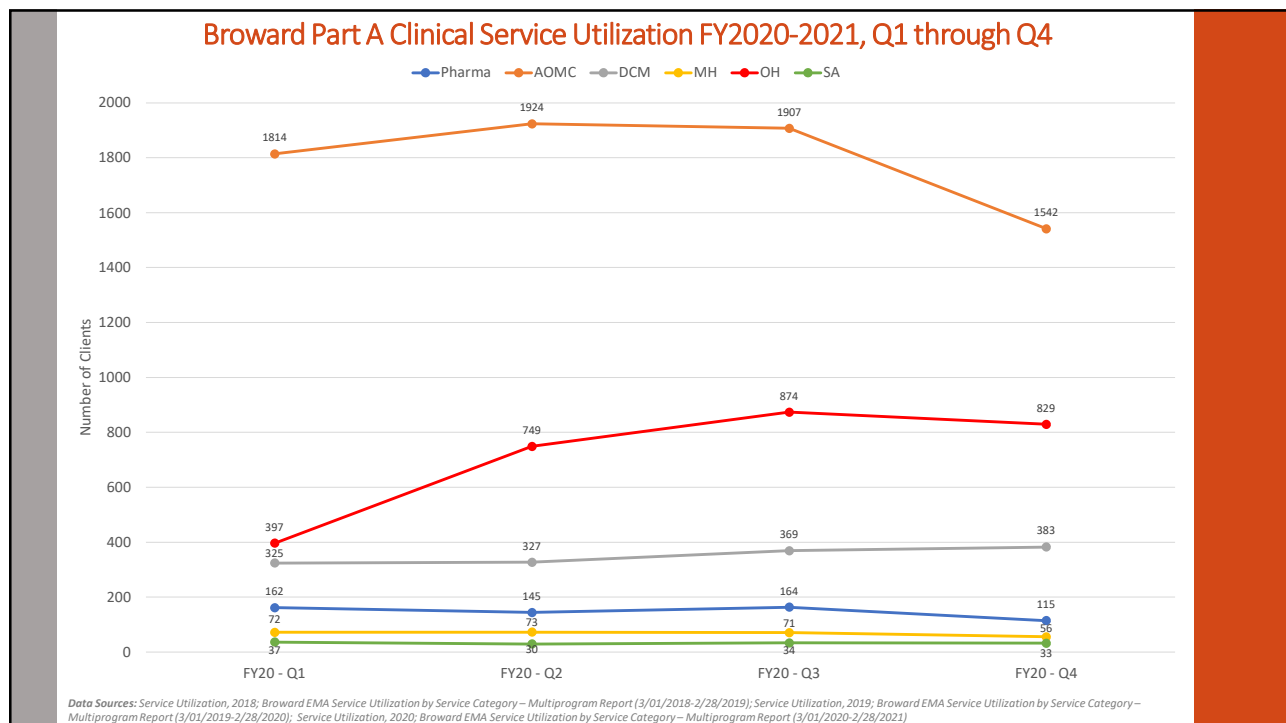


Data Sources: Service Utilization, 2018; Broward EMA Service Utilization by Service Category – Multiprogram Report (3/01/2018-2/28/2019); Service Utilization, 2019; Broward EMA Service Utilization by Service Category – Multiprogram Report (3/01/2019-2/28/2020); Service Utilization, 2020; Broward EMA Service Utilization by Service Category – Multiprogram Report (3/01/2020-2/28/2021)

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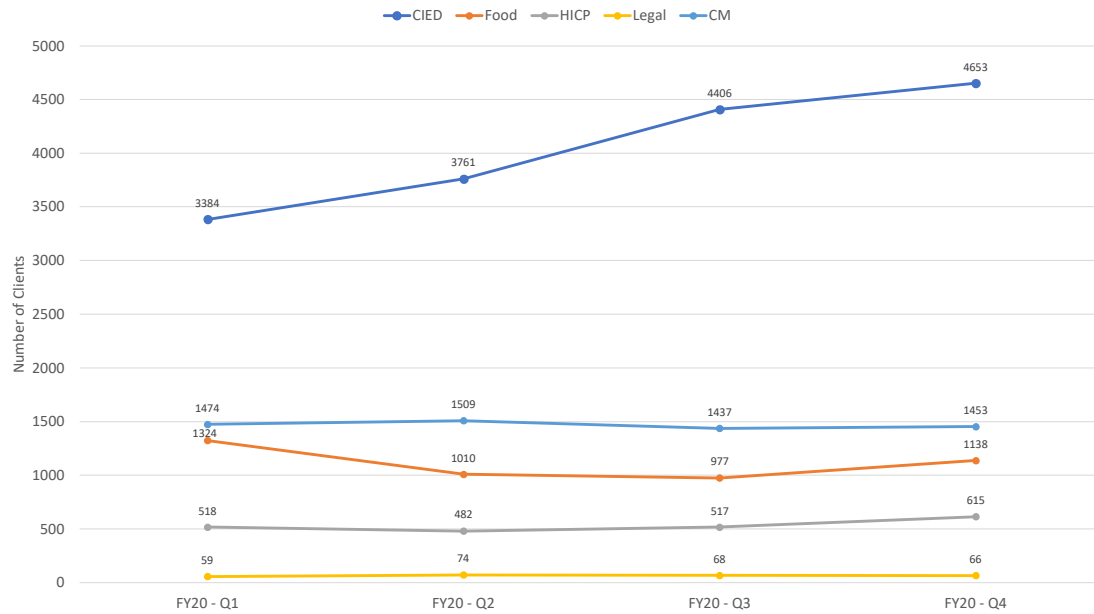


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Broward Part A Support Service Utilization FY2020-2021, Q1 through Q4



Data Sources: Service Utilization, 2018; Broward EMA Service Utilization by Service Category – Multiprogram Report (3/01/2018-2/28/2019); Service Utilization, 2019; Broward EMA Service Utilization by Service Category – Multiprogram Report (3/01/2019-2/28/2020); Service Utilization, 2020; Broward EMA Service Utilization by Service Category – Multiprogram Report (3/01/2020-2/28/2021)

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Broward Part A Service Utilization Notable Trends

- Clinical Service Utilization
 - Oral Health service utilization decreased by 46% between FY19 and FY20
 - Oral Health service utilization increased by 46% between Q1 and Q2 of FY2020-2021
 - AIDS Pharmaceutical Assistance service Utilization decreased by 76% between FY19 and FY20
- Support Service Utilization
 - There were no remarkable differences in service utilization for all support service categories between FY2018 and FY2020
 - CIED service utilization increased each quarter in FY2020
 - 10% increase between Q1 and Q2
 - 15% increase in between Q2 and Q3
 - 5% increase between Q3 and Q4
- Potential causes of increases/decreases in service utilization:
 - Impact of the COVID-19 pandemic.
 - Fewer oral health service providers.
 - Changes made to the ADAP Formulary in 2019.
 - ADAP suspending the requirement of clients needing updated viral load and CD4 labs to get their medications.

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Questions?

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QIP Toolkit Refresher

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QIP PLANNER 2021-2022

This planner is a recommended timeline for deliverables related to the QIP process.

Checkpoint check-ins are one on one virtual check ins and provide an opportunity to check in with the CQM team. Time slots are available from 10am to 3pm

QIP PHASE	STARTING	ENDING	CHECKPOINT CHECK-INS	DATE 1	DATE 2
STEP 1: GEARING UP FOR QIPS	5/5/21	6/15/21	IDENTIFY FOCUS AREAS FOR QIPS	6/7/21	6/9/21
STEP 2: IDENTIFYING THE PROBLEM	6/16/21	7/27/21	DRIVER DIAGRAM	7/20/21	7/22/21
			AIM STATEMENT	8/22/21	8/24/21
STEP 3: AIM STATEMENTS	7/28/21	9/1/21	DRIVERS/CONTRIBUTING FACTORS	8/31/21	9/2/21
STEP 4: PDSA CYCLES	9/8/21	11/30/21	PDSA CYCLE PLANNING FORM	10/26/21	10/28/21
STEP 5: PRELIMINARY DATA REVIEW	12/1/21	12/31/21	PRELIMINARY DATA REVIEW	12/14/21	12/16/21
STEP 6: EVALUATE RESULTS OF THE QIP	1/1/22	1/31/22	QIP POSTER	2/15/22	2/16/22
STEP 7: SUMMING IT ALL UP	2/1/22	2/28/22	Quality Network meeting dates are in white		

MAY	JUNE	JULY	AUGUST	SEPTEMBER	OCTOBER
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24 25 26 27 28 29 30	22 23 24 25 26 27 28	22 23 24 25 26 27 28	22 23 24 25 26 27 28	22 23 24 25 26 27 28	22 23 24 25 26 27 28
31			29 30 31	29 30 31	29 30 31

NOVEMBER	DECEMBER	JANUARY	FEBRUARY	MARCH	APRIL
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29 30	29 30 31	29 30 31	29	29 30 31	29 30 31

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Learning Objectives:

Examine agency performance measurement data
Identify areas for improvement



Data-Informed Quality Improvement



Quality improvement should be informed and guided by data

**Step 1:
Gearing up for QIPs**

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Look at the data at least quarterly

- Doing well, or not?
- Performance stable, or a trend?
- Compared to other grantees?

Decide how to act on the data

- Which areas need improvement?
- What are our priorities for improvement?

Begin improvement work

- Identify project team
- Define improvement goal

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Checkpoint 1: Identify Focus Areas for Quality Improvement Projects

Issue:	
Prevalence/Frequency/ Incidence:	
Populations(s) affected:	
Seriousness/Urgency:	
Available data sources:	
Possible interventions:	
Current interventions:	

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Checkpoint 1 Due Date

June 15, 2021



Checkpoint Check-ins

June 7, 2021

June 9, 2021

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Client Satisfaction Surveying Process

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What is the current process
for surveying client
satisfaction in your agency?



How is the survey
administered?

Discussion

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COVID-19 Vaccine

Hesitancy

Confidence

Challenges

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Announcements

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Annual PE Training Opportunities

Ryan White Part A Provide Enterprise Training Schedule (May 17 – 21, 2021)		
Date	Time	Session Type
Monday, May 17	12:00 p.m. to 2:00 p.m.	Basic Navigation
Monday, May 17	3:00 p.m. to 5:00 p.m.	Case Management Training
Tuesday, May 18	3:00 p.m. to 5:00 p.m.	Mental Health/Substance Abuse Training
Wednesday, May 19	11:00 a.m. to 12:30 p.m.	Food Bank/Food Voucher Training
Wednesday, May 19	1:00 p.m. to 2:30 p.m.	Ambulatory Outpatient Medical Care – Reviewing Import Files and Checking Eligibility
Wednesday, May 19	3:00 p.m. to 5:00 p.m.	EHE Module Training (<i>EHE funded providers only</i>)
Thursday, May 20	11:00 a.m. to 1:00 p.m.	Disease Case Management Training
Thursday, May 20	3:00 p.m. to 4:30 p.m.	Outcomes Report Discussion
Friday, May 21	11:00 a.m. to 01:00 p.m.	Billing and Invoicing

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Next Meeting Date:

June 16, 2021

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