



Clinical Quality Management Committee
United Way Center Ansin Building
3250 SW 3rd Avenue, Ryder Room
January 17, 2020

Members		Agency		Staff	
Moniet Creebsburg	AHF			Clarice Evans	
Katie Hampton	AHF			Geoff Downie	
Taylor Smalls	AHF			Petra Brock	
Rhonda Wright	Borinquen			Robert Ladner	
Rosemonde Francis	Borinquen			Sandra Sergi	
Sandra Roco	Borinquen			Susy Martinez	
Diada Sonceau	Borinquen				
Ariel Williams	Care Resource				
Rafael Jimenez	Care Resource				
Edgar Mojica	Care Resource				
Tabitha Hunter	CHI				
Kirk Palmer	Empower U				
David Goldberg	FLDOH				
Javier Romero	FLDOH ADAP				
Jose Ortega	MBCHC				
Carla Valle-Schwenk	MDC-OMB/RWP				
Laura Van Sant	SFAN				
Samantha Ross	UM				
Jasmin O'Neale Lewis	UM				

I. Call to Order/Introductions

Jasmin O’Neale-Lewis, the Vice Chair, called the meeting to order at 9:30 a.m. She welcomed everyone and asked for introductions.

II. Review Agenda & Minutes

The committee reviewed the agenda. No changes were made.

III. Standing Business

- *Ryan White Update*

Carla Valle-Schwenk

Carla Valle-Schwenk provided the Ryan White Program Update. She explained that Provide Enterprise has been providing trainings via webinar to users. Live, on-site, full system trainings will be held in February and locations TBD.

The recommendations for Part A/MAI funding were sent to the Mayor. The Mayor approved all the recommendations. All awards are preliminary and subject to final approval by the County Commissioners. For questions regarding the RFP process, contact Daniel T. Wall, Assistant Director, Office of Management and Budget and Project Director, Ryan White Part A Program.

- *Quality Improvement Projects Update* *Robert Ladner/Sandra Sergi*

- *GAP Card Quality Improvement Project* *Robert Ladner*

Robert Ladner reviewed the summary of GAP Card findings (copy on file) from the PDSA cycle. He reported that the initial concern was a high percentage of ACA clients had un-billed GAP card events. Focus group interviews were completed with the following two groups: Ryan White Program clients who had GAP card billing and Ryan White clients with no GAP card billing reported in SDIS between January 1 and July 31, 2019. The focus group interviews revealed that over half (64%) of the ACA clients in the “no bill” group reported using the GAP card and 91% of the “billed” group reported using the GAP card, mostly for primary care visits. Petra Brock explained that she is obtaining the GAP Card data from the SDIS services file. Ms. Valle-Schwenk stated that she would like to know the names of the doctors outside of the Ryan White Network, who are not accepting the GAP card, to facilitate the process for them to accept the GAP card.

Sandra Sergi reported that ACA clients have reported that they present the GAP card at the time of the visit, the card is scanned, and the client does not receive a bill. Clients reported being unaware that the GAP card only covers HIV-related conditions. Clarice Evans recommended improved education among clients and providing additional information to specialists on how to use (bill) the GAP card. The next steps in the GAP card quality improvement (QI) project is that Borinquen and Citrus Health Network have agreed to be a QI site for improving the referral process and automating GAP card billing, GAP card education, and communicating with outside specialty providers. Because of time constraints, CQMC members agreed to revisit the discussion of the GAP card findings.

IV. New Business

- *Integrated Plan Introduction* *Robert Ladner*

Dr. Ladner reviewed the Integrated Plan activities related to the work of the CQMC (copy on file). He highlighted Retention-in-Care Disparity populations (i.e., Black/African American males, Black/African American females, Haitians, Hispanic MSMs). As the CQMC begins to integrate more quality improvement initiatives, the CQMC will evaluate the impact of projects. Retention in care (RiC), viral load suppression and client satisfaction will be the three pillars addressed in quality initiatives in order to improve client health outcomes. Dr. Ladner invited CQMC members to future Strategic Planning Committee meetings.

- *Client Satisfaction Survey/Potential Quality Improvement Projects* *Clarice Evans*

Clarice Evans reviewed the report, “Suggestions for QI Initiatives Based on 2019 Client Satisfaction Survey Results” (copy on file). She explained that overall the sample of the

Client Satisfaction was representative of the Ryan White Program client population. Ms. Evans emphasized the following results from the survey:

Overall, **50.9%** of clients were unaware of peer support. There was discussion on whether the clients knew what a Peer was as well as if clients knew the difference between an MCM and Peer. Some agencies do not use Peer in the job title. For example, Care Resource uses the title of Client Support Assistant. Laura Van Sant reported that SFAN Hialeah and SFAN Florida City do not have a Peer. Ms. Valle-Schwenk emphasized that Peer services should be offered regardless if a Peer works at the Ryan White Program site. Ms. Van Sant asked if there was a direct correlation between a client seeing a Peer and a higher client satisfaction rate. Ariel Williams proposed delving further into the data of those clients who were aware of a Peer, how often did they see the Peer and is their VL undetectable. Susy Martinez explained that to look further into the data, CQMC members would have to prioritize the Peer Support client satisfaction results as a QI project.

Overall **14.9%** missed medication within the past two weeks. A suggested project could determine why clients are missing medication on a regular basis and how to address those issues. Rosemonde Francis suggested having a consent to text would allow texting as a mechanism for medication reminders and medication adherence. David Rigg suggested using telehealth to observe clients taking their medication.

Ms. Valle-Schwenk requested the status of all QI projects. BSR will bring the status of all QI projects to the next meeting. This process will assist CQMC members to select the QI project.

- *2019 Ryan White Program Client Satisfaction Survey Minority Analysis for MCM and Outpatient Ambulatory Health Care* *Clarice Evans*

Ms. Evans reviewed the Minority Analysis for MCM and Outpatient Ambulatory Health Care. The key populations listed in the Integrated Plan include Black/African American males, Black/African American females, Haitian, and Hispanic MSM.

- Haitians were least satisfied with MCM and Outpatient Ambulatory Services.
- Black/African American males reported receiving MCM services mostly at Care Resource - Midtown and PHT/SFAN - Jackson, Jessie Trice, and North Dade.
- Black/African American females received MCM services mostly at Care Resource - Midtown, PHT/SFAN – Jackson, and PHT/North Dade.
- Haitian males reported receiving MCM services mostly at Care Resource - Midtown, Jessie Trice, and PHT/North Dade.
- Hispanic MSMs reported receiving MCM services at Care Resource, Miami Beach Community Health Center - Stanley C. Myers, and AHF - Miami Beach.
- A lower percentage of clients reported receiving medical care this year. Only 91% of Hispanic MSMs reported receiving medical services.

Carla Valle-Schwenk suggested two QI projects for consideration by the CQM Committee:

- MAI Populations - Treatment adherence conversations that are clear, consistent, and informative. Implement a new approach so that treatment adherence is understood by clients. (MAI populations)
- Cultural sensitivity and customer service training for front desk staff, MCMs, and Peers.

Community Health of South Florida (CHI) Quality Improvement Review Robert Ladner

Dr. Ladner reported that Dr. Jeffrey Beal is developing a Medical Record Review Tool. Additional information will be provided at the next meeting.

Clinical Quality Management (CQM) Performance Report Card Clarice Evans

Ms. Evans reviewed the FY29 Cycle 2 Clinical Quality Management (CQM) Comparative Version Performance Report Card (copy on file).

- Overall the RWP is doing well; 73% of clients are retained in medical care and 79% are virally suppressed.
- 99% of MCM clients are in medical care
- There was a 6% increase in new MCM clients, AHF – Homestead, in particular, is showing steady growth.

Cycle 3 of the Clinical Quality Management (CQM) Report Card will be available by the next meeting.

V. Action Items and Repetition

Ms. Martinez summarized the action items.

- The February 21, 2020 meeting is cancelled and a Joint CQMC and R&R meeting will be scheduled (based on availability)
- CQM Committee members need to RSVP to all meetings
- BSR will provide an update on the quality improvement projects at the next meeting
- CQMC members to send Susy Martinez suggested QI projects to prioritize for the next fiscal year.

VI. Announcements

The HOPWA program will be opening the Long Term Rental Assistance (LTRA) application process from February 10 through February 21, 2020. Both the medical form and LTRA application will be available on aidsnet.org.

The January Subrecipient Forum has been cancelled.

Care Resource will now have Short-Term Rent, Mortgage, and Utility (STRMU) assistance.

VII. Next Meeting

The next meeting is scheduled for March 20, 2020 (this meeting date may change based on availability of a conference room to hold a joint CQMC and R&R meeting).