



**Clinical Quality Management (CQM) Committee
Zoom Virtual Meeting
August 19, 2022**

Members	Agency
Brad Mester	AIDS Healthcare Foundation (AHF)
Kepler Verduga	AHF
Neil Walker	AHF
Javier Duran Sosa	AHF
Rhonda Wright	Borinquen Medical Centers (BMC)
Rosemonde Francis	BMC
Diego Schmuels	BMC
Hardeep Singh	CAN Community Health (CAN)
Tim Emanzi	CAN
Nataliya Johnson	CAN
Rafael Jimenez	Care Resource Community Health Center (CRCHC)
Manny Pico	CRCHC
Emma Muñoz	Citrus Health Network (CHN)
Resha Mehta	Empower U Community Health Center
David Goldberg	Florida Department of Health-Miami Dade County (FDOH)
Karen Poblete	FDOH

Members	Agency
Franklin Monjarrez	Jessie Trice Community Health Systems (JTCHS)
Teresa Watts	JTCHS
Jose Ortega	Miami Beach Community Health Center (MBCHC)
Guillermo Fernandez	MBCHC
Carla Valle-Schwenk	Miami-Dade County OMB-GC-RWP
Ana Nieto	MDC-OMB-GC-RWP
Theresa Smith	MDC-OMB-GC-RWP
Takisha Nelson	Public Health Trust (PHT)
Laura Van Sant	PHT
Sonya Boyne	University of Miami CAP
Behavioral Science Research CQM Staff	
Barbara Kubilus	
Frank Gattorno	
Robert Ladner	
Sandra Sergi	
Susy Martinez	

Note that documents referenced in these minutes are accessible to members and the public prior to (and during) the meeting, at <http://aidsnet.org/cqm-documents/>

I. Call to Order/Roll Call

Rhonda Wright, CQM Committee chair, called the meeting to order at 9:32 a.m.

II. Roll Call (Zoom Attendees)

Members noted their presence by indicating "Here" or "Present" in the chat box.

III. Review Agenda & Minutes

The committee reviewed today's agenda and the meeting minutes from July 15, 2022. No changes were made.

IV. Subrecipients QI Projects presentations/Lessons Learned

Teresa Watts presented Jessie Trice Community Health Systems' (JTCHS) Do, Study and Act steps (copy on file). She shared the following:

Do Step

- JTCHS used a multidisciplinary team model of HIV care that led to improved health outcomes.
- Medical Case Managers were able to assist clients who were age 55+ with mental health services, food, housing a transportation.
- Viral loads results, medical appointment dates, and current medical visit data was collected.

Study Step

- At the close of the QI project, JTCHS retained 20 clients out of 24 exceeding their original goal of retaining 10 out of 24.
- JTCHS reported that comorbidities, loneliness, poor social support, cognitive impairment, and difficulties with activities of daily living, affect 55+ participants at higher rates than other age groups.
- Clients want to hear from their MCMs.
- Clients adapt well to telehealth when educated.
- MCMs must improve data entry into Provide Enterprise Miami.

Act Step

- JTCHS will ADOPT their change idea across all age groups.
- The QI project will be embedded to into the MCM culture.
- Action steps, results and trends will be discussed during weekly huddles.

Tim Emanzi and Hardeep Singh presented CAN Community Health's Lessons learned (copy on file). They shared the following:

- CAN Community Health's RiMC improved from 41% to 61% when removing clients who were in care for less than 90 days.
- CAN Community Health staff drilled down on their data and found that there were clients included in the QI Dashboard that had expired eligibility and or cases were

closed. After removing all the clients who were not eligible, there was a total of 5 clients. Because of the small number of clients, CAN Community Health will now focus on the M9 indicator (MCM clients receiving oral health care).

V. **Ryan White Program FY 2021 Client Satisfaction Survey Summary of Findings** *Robert Ladner*

Robert Ladner presented the Ryan White Program FY 2021 Client Satisfaction Summary of Findings (copy on file). A total of **517** were completed with clients receiving Outpatient Ambulatory Health Services (OAHS) and Oral Health Care (OHC). The clients were selected from the top 50 OAHS providers seen by clients in the Ryan White Program. To qualify, clients must have been in RWP OAHS care at the site for at least 6 months. Clients who completed the survey were provided with a \$25 Walmart e-gift card by text, email or by US mail.

Dr. Ladner summarized the following points:

- In CY2021 **49%** of the survey respondents were 50-64 years old.
- Most of the clients (**71%**) were male.
- Most of the survey respondents' preferred language was Spanish (**55%**).
- Seventy-six (**76%**) of clients were very satisfied with their OAHS service provider, an increase from 2020.
- Satisfaction levels with the dentist remained unchanged from 2020, at **56%**.
- There was an increase in the percent very satisfied (VS) for the oral hygienist in 2021. In 2020 respondents reported **55% VS**, and in 2021 respondents reported **66% VS**.
- Compared to FY 2020, both OAHS and OHC clients show lower levels of satisfaction with the lag time for a new or next appointment (**46%** for OAHS, **23%** for OHC)

VI. **Revisions to the MCM Series of the Clinical Quality Management** *Frank Gattorno*

Frank Gattorno presented the change to the way the CQM Performance Report Card will include clients in the M1 (*active MCM clients*) indicator. He explained that in previous versions of the CQM Performance Report Card, closed cases were captured when the last billed encounter code was a Case Closure Activity (CCA). The new and more precise way of calculating closed cases is by using the CSCP status instead of the CCA encounter code. With the use of the open CSCP status as a filter, the M1 indicator (*active MCM clients*) drops the number of MCM clients overall from 7723 to 6341 clients. The revisions have yielded positive improvements in the MCM indicator series for the majority of the subrecipients (copy on file).

VII. Setting Targets for the CQM Performance Report Card Indicators

Frank Gattorno/Robert Ladner

Following the revised MCM series of the CQM Performance Report Card, CQM committee members were tasked with recommending targets for the indicators without targets on the CQM Performance Report card listed below. The draft target percentages are based on the average responses suggested by CQM committee members during the meeting listed below:

- *C5 HIV Care Continuum-% RWP clients with non-missing VL measurement-95%*
- *M5 MCM-% RWP clients with non-missing VL measurement-96%*
- *M7 MCM-% MCM clients with MCM contact within previous 90 days-93%*

Additional CQM Performance indicators without targets will be reviewed at the next CQM Committee meeting in September.

VIII. Next Steps

- ✓ The remaining indicators without targets will be reviewed at the next meeting in September.
- ✓ Frank Gattorno will send the revised indicators for subrecipients to review in detail
- ✓ CQM Committee members to complete the evaluation via survey monkey.
- ✓ Members were invited to attend the Effective Women Centered Care Practices virtual presentation on August 31, 2022, from 12:00 pm-1:00 pm.

IX. Announcements

CQM Committee members were encouraged to attend the monthly quality improvement symposium.

X. Evaluation/Poll

CQM committee members completed an evaluation via a poll feature. The results of the evaluation include: the session provided useful information-100% agreed and Satisfaction with the meeting overall-94% satisfied, somewhat 6%.

XI. Next Meeting

The next meeting is scheduled for Friday, September 16, 2022, via Zoom.