



**Clinical Quality Management (CQM) Committee  
Zoom Virtual Meeting  
September 16, 2022**

Members	Agency
Brad Mester	AIDS Healthcare Foundation (AHF)
Kepler Verduga	AHF
Eddy Diaz	AHF
Javier Sosa Duran	AHF
Rhonda Wright	Borinquen Medical Centers (BMC)
Diego Shmuels	BMC
Hardeep Singh	CAN Community Health (CAN)
Tim Emanzi	CAN
Rafael Jimenez	Care Resource CRC (CRCHC)
Manny Pico	CRCHC
Edgar Mojica	CRCHC
Emma Muñoz	Citrus Health Network (CHN)
Vanessa Mills	Care 4 U
Kirk Palmer	Empower U CHC
David Goldberg	Florida Department of Health-Miami Dade County (FDOH)

Members	Agency
Karen Poblete	FDOH
Javier Romero	FDOH
Franklin Monjarrez	Jessie Trice Community Health Systems (JTCHS)
Teresa Watts	JTCHS
Nelly Rodriguez	Miami-Dade County OMB-GC-RWP
Amaris Hess	New Hope CORPS
Takisha Nelson	Public Health Trust (PHT)
Laura Van Sant	PHT
Naeem Tenant	PHT
Samantha Ross	University of Miami CAP
<b>Behavioral Science Research CQM Staff</b>	
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 August 19, 2022. No changes were made.

### IV. Subrecipients QI Projects presentations

Naeem Tenant presented Public Health Trust (PHT) Prevention, Education, and Treatment Center Plan, Do, Study, and Act (PDSA) steps (copy on file). He shared the following:

#### Plan Step

- PHT PET planned to schedule the oral health appointment on the same day as the client's primary visit as well as reminder calls the day prior to the oral health appointment.
- PET's goal was to increase the percentage of PET center MCM clients without an OHC billed visit in the last 12 months (among 18 Hispanic MMSC) from 0% to 50%.

#### Do Step

- The MCM scheduled the primary visit on the same day as the OHC appointment.
- The MCM provided reminder calls the day prior to the OHC visit.
- The MCM, Peer, PCP and OHC provider educated clients on the importance of maintaining OHC appointments.
- Provided an incentive (Partnership merchandise) to the clients who kept their OHC appointment.

#### Study Step

- At the close of the QI project, PET Center increased the percentage of their MCM clients without an OHC appointment from **0% to 88%** (16 out of 18) surpassing the QI project goal of 50%.
- One client was a no show, and one client cancelled their appointment.

#### Act Step

- PET Center will ADOPT their change idea and expand to other sites.

Eddie Diaz from AIDS Healthcare Foundation (AHF) presented the PDSA for their QI project (copy on file). He shared the following:

#### Plan Step

- AHF Jackson North provided intensive case management (bi-weekly contacts, scheduled labs and PCP visits, and reminder calls) to improve viral load suppression among the Black/African American male clients who receive both MCM and Outpatient Ambulatory Health Services (OAHS).
- Their goal was to increase viral load suppression among their Black/African American clients from 0% to 50% by August 31, 2022.

#### Do Step

- Frequent client contacts lead to improved adherence counseling
- Generated more timely referrals because of increase in client contacts.

*Problems/Challenges:*

- Clients with substance use and mental health conditions were difficult to engage.

Study Step

- At the end of August 2022, AHF Jackson North increased the viral load suppression rate from 0% to 57%.  
Three cases were closed (1) financial eligibility, (2) private health insurance, and (3) unsuccessful outreach attempts of the seven remaining following the closures, 4 clients achieved viral load suppression.

Act Step

- AHF plans to ADOPT the intensive MCM model at other sites focusing on clients with unsuppressed viral loads.

**V. Setting Targets for the CQM Performance Report Card Indicators**

*Susy Martinez/Frank Gattorno*

Following the revised MCM series of the CQM Performance Report Card, CQM committee members were tasked with recommending the remaining 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:

- *N5 OAHS-% RWP clients with non-missing VL measurement - 95%*
- *M6 MCM-% MCM clients with MCM plans of care (action plans) created or updated two or more times (and at least 90 days apart) within previous 12 months (HAB/HRSA Performance Measure) - 95%*
- *M9 MCM-% MCM clients receiving Oral Health Care services - 50%*

**VI. Clinical Quality Management (CQM) Committee FY 2022 Mid-Year Evaluation Results**

*Susy Martinez*

Susy Martinez presented a summary of the CQM Committee FY 2022 Mid-Year Evaluation Results (copy on file). Thirteen (13) evaluations were submitted to BSR via a survey monkey link.

- The survey included eight sections in the evaluation: responsibilities of the CQM Committee, subrecipient staff commitment to the CQM process, quality improvement culture, BSR'S Quality Improvement support, suggestions for BSR to improve technical assistance (TA), topics to improve QI knowledge, greatest satisfaction and greatest frustration with QI project, and steps for a QI project.

*"Topics to improve QI knowledge" include:*

- Understanding data presented
- Defining and understanding target percentages, baselines, goals, and outcomes
- Deeper knowledge of Excel

- Increasing the QI culture (more buy-in) from staff
- More time to produce QI projects
- Best Practices

*Greatest satisfaction undertaking a QI project included:*

- Working and being part of a team to meet the needs of clients. Teamwork was rewarding.
- Documenting progress over time.
- Increased utilization of various databases, EMR, Provide Enterprise Miami and comparing health outcomes between Ryan White and MAI participants.

*Greatest frustration undertaking a QI project included:*

- Interpreting data
- Learning which PE reports to generate
- Finding the time to meet with the team, analyze data and meet the demands of competing responsibilities of staff.
- The amount of time and staff required to run an effective QI intervention.

## **VII. Next Steps**

- ✓ Susy Martinez will send the results of the final targets for the CQM Performance Report Card indicators.
- ✓ Susy Martinez will email today's meeting documents to CQM Committee meeting members.

## **VIII. Announcements**

David Goldberg reported that Florida Department of Health-Miami Dade County (FDOH) is hiring a contract manager.

Robert Ladner announced that Behavioral Science Research is hiring an associate director.

## **IX. 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 - 100% satisfied.

## **X. Next Meeting**

The next meeting is scheduled for Friday, October 21, 2022, via Zoom.