HOW TO WRITE A QI INTERVENTION PROTOCOL SFAN — FIRST CQM PROJECT			
ESSENTIAL ELEMENT	BSR GUIDANCE	DRAFT SFAN STATEMENT SUGGESTIONS	
1) SUMMARIZE THE QI INTERVENTION	In two or three sentences, describe the QI intervention and how it addresses the identified QI problem.	SFAN was prioritized by the CQM Committee based on unsuppressed viral load levels among MCM and OAHS client populations. The QI intervention is intended to <i>raise the level of VL suppression among a test population of SFAN clients with unsuppressed VLs, using a high-intensity "VIP team" intervention,</i> with the goal of increasing the VL suppression levels in this client group.	
2) DESCRIBE TARGET POPULATION	Who will be the target of the QI intervention? How are these clients differentiated from the rest of the clients in care at the agency? [It needs to be specific and related to the client outcomes.]	233 clients were identified in the M3 and N3 Indicators in the FY 2020-21 Cycle 2 CQM Report Card; A total of 90 MCM clients were identified as having unsuppressed viral loads in the Open by Name view in PE dated 12-9-2020 after merging the two files. The target of the QI Intervention will be these 90 clients compared to SFAN MCM clients with suppressed VLs.	
3) SPECIFY THE BASELINE MEASUREMENT	What is the baseline "pretest" measurement, which will become the basis of determining if the QI intervention had an impact?	The baseline measurement criterion for these test clients is "unsuppressed VL," as verified through Provide's "Open by Name "view before they are placed into the VIP Team QI intervention protocol.	
4) DESCRIBE THE "QI INTERVENTION"	What EXACTLY does the "VIP Treatment" entail? This includes (1) the frequency of additional monthly or weekly contacts and (2) by whom (MCMs, Peers, Pharmacists, Physicians and/or Nurse Navigators). BE SPECIFIC these will be audited through Provide to ensure that all the participants in the QI protocol get identical levels of intervention.	Intervention #1: Peers will contact SFAN clients with unsuppressed VLs (1x every 14 days). Peer responsibilities will include: Peer will assist/contact with scheduling/rescheduling medical and/or lab appointments. Peer will review/update the medical/lab history in Provide prior to contacting client to determine if updated. Peer will provide HIV education and medication adherence. Peer will refer clients to the Nurse Navigator who are experiencing side effects from medications (Peer referrals will be internally tracked). Peer will document HIV education/medication adherence in Provide/CAREWare. Intervention #2: Nurse Navigator will contact SFAN clients with unsuppressed VLs greater than 100,000 copies (1x every 14 days). Nurse Navigator responsibilities will include: Contact all clients referred by the Peer (When a client is referred by the Peer, the client will receive a Nurse Navigator contact at least once every 14 days).	

		 Discuss medication adherence, side effects, diagnoses and other comorbidities related to HIV. Discuss any barriers preventing the client from obtaining medication. Nurse Navigator will report all barriers to the assigned MCM. Nurse Navigator will document HIV education/medication adherence in Provide. Tracking Tool will include: Current viral load result Next lab appointment Next medication appointment Age Gender Race Housing type History of Substance use/misuse Mental Health status Transportation needs
5) SPECIFY THE START DATE AND DURATION OF THE INTERVENTION	This is a test. It starts on a certain date and ends on a certain date. VL suppression should be visible in 90 days, so we are suggesting a duration of 90 days.	The QI intervention begins February 15, 2021, and will continue for four months (90 days + one month).
6) SPECIFY THE "POST-TEST" MEASUREMENT THAT MEASURES THE QI IMPACT	Specify what you are using for a post- test measure.	VLs will be measured for all clients in the VIP Team QI intervention at 90 days, and the "% unsuppressed" for this group will be compared to the "100% unsuppressed" baseline measurement.