| Clinical Quality Management (CQM) Committee Key | | | | | | | | | | |
|---|---------|--------|--------|---------|--------|--------|--------|--------|--------|--------|
| Activities | Jun-23 | Jul-23 | Aug-23 | Sep-23 | Oct-23 | Nov-23 | Dec-23 | Jan-24 | Feb-24 | Mar-24 |
| | | | _ | - | | | | | | |
| Create the mechanism to recruit clients from CABs and Peers | | | Х | Х | | | | | | |
| Recruit members from subrecipient CABs to become CQM Liaisons | | | | Х | Х | Χ | Χ | Χ | Χ | Χ |
| | | | | | | | | | | |
| Create a CQM affinity group drawn from subrecipient staff Peer Educators | | | | Χ | Χ | Χ | Χ | Χ | Χ | Χ |
| Capacity Building | | | | | | | | | | |
| Develop an outline for training agenda (problem identification, baseline data | | | | | | | | | | |
| measurement, and root cause anaylsis) | | | Χ | | | | | | | |
| QI basics training | | | | Х | | | | | | |
| Enhanced QI training | | | | | | Χ | | | | |
| CQII webinars (optional) | | Х | Χ | Χ | Χ | Χ | Χ | Χ | Χ | Χ |
| SE AETC webinars (optional) | | Χ | Χ | Χ | Χ | Χ | Χ | Χ | Χ | Χ |
| Data | | | | | | | | | | |
| | | | | | | | | | | |
| | | X (M7/ | | | | | | | | |
| Refinement to the CQM Performance Report Card | | POC) | | | | | | | | |
| CQM performance Report Card distributed to Subrecipients | | X | | | Х | | | Χ | | |
| Integrated Plan Activities (suppression and RiMC analysis for special | | | | | | | | | | |
| populations) | | X | | | | | | | | |
| Integrated Plan Activities (suppression and RiMC analysis for disparity | | | | | | | | | | |
| populations) | | Х | | | Χ | | | | | |
| QI Dashboard dissemination (Upon request) | Х | X | | Х | | | Χ | | | |
| Client Satisfaction Survey (Construction) | Х | Х | | | | | | | | |
| Client Satisfaction Survey (Collection) | | | | Х | Х | Х | | | | |
| Evaluation | | | | | | | | | | |
| Bi-monthly status updates of Part A, MAI and Part B initiatives and | | | | | | | | | | |
| innovations | | | Χ | Χ | | Χ | | Χ | | Χ |
| Semi-annual CQM reports on progress of CQM QI and Integrated Plan | | | | | | | | | | |
| activities, including outcome measurements for specialty groups and | | | | | | | | | | |
| disparity populations | | | | Χ | Χ | | | | | |
| CQM Committee Semi-annual evaluation survey for CQM Committee | | | | | | | | | | |
| members/MAI | | | Χ | | Χ | | | | Χ | |
| CQM Plan Updates (Initial update was in May 2023) | | | | | • | Χ | | | Χ | |
| Other Key Activities | | | | | | | | | | |
| Disseminate information on QI projects (IPEW) | | | | | | Х | | | | |
| Set Annual quality goals | | | | | | | | | Х | |
| Presentations of QI Projects/MAI Innovations | X (BMC) | | | X (CAN) | | | | | | |



Increasing Client Engagement in the Clinical Quality Management (CQM) Process

Clinical Quality Management (CQM) Committee Meeting
August 18, 2023

Prepared by: Behavioral Science Research





HRSA's Policy Clarification Notice 15-02 Infrastructure

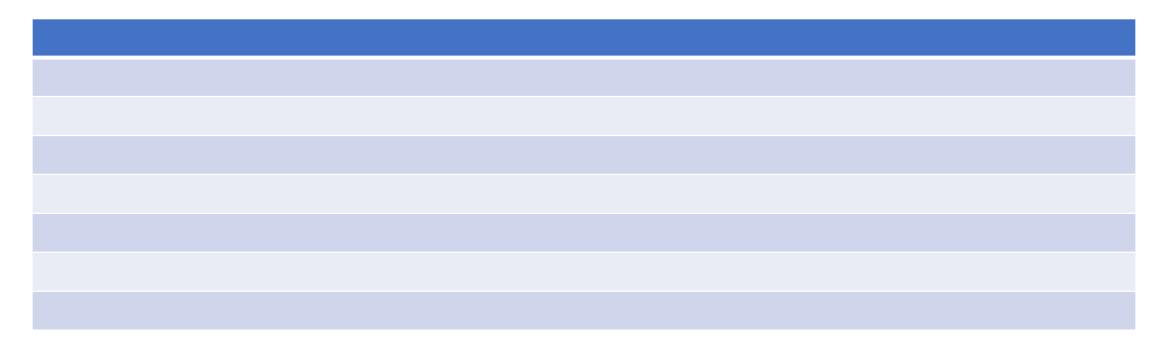
• People with HIV Involvement: Involvement of people with HIV that reflect the population being served to help ensure that the needs of people with HIV are being addressed by CQM activities

Ways the CQM Committee agreed to recruit and involve clients in the CQM process



- 1. Designate a member from each RWP subrecipient Consumer Advisory Board (CAB) as a CQM Liaison to attend CQM Committee meetings and raise issues related to service delivery.
- 2. Create a CQM affinity group drawn from subrecipient staff Peer Educators.

CAB member representation How many subrecipient have CABs?



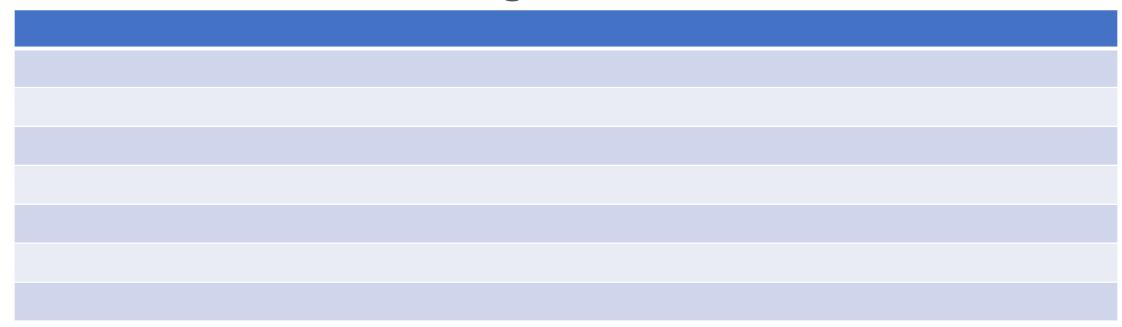
Designate a member from each RWP subrecipient Consumer Advisory Board (CAB) as a CQM Liaison to attend CQM Committee meetings and raise issues related to service delivery.

Peer affinity group

How many peers would we need on the CQM Committee?

• Will the Peers be able to bill for the time spent attending the Peer affinity meetings?

What are some topics to include on the CQM Committee meeting (work plan)activities and agenda?



Next Steps

