Clinical Quality Management Committee Meeting
Cleveland TGA
March 19, 2018 Meeting Minutes

Attendees:

Name	Agency/Affiliation	Representing
Erica Shields	AIDS Healthcare Foundation	Part A Funded Agency
Michele Princeton	AIDS Taskforce	Part A Funded Agency
Adriana Whelan	Circle Health Services	Part A Funded Agency
Sandrell Porter	DSAS	Part A Funded Agency
Jennifer Gosnell	Family Planning of Lorain	Part A Funded Agency
Allison Kloos	Far West Center	Part A Funded Agency
Doug Vest	May Dugan	Part A Funded Agency
Summer Barnett	MercyHealth	Part A Funded Agency
Dr. Ann Avery	MetroHealth	Part A Funded Agency
Adam Torres	Neuva Luz	Part A Funded Agency
Rochena Crosby	ORCA House	Part A Funded Agency
Cathy Iannadrea	Signature Health	Part A Funded Agency
Dr. Barb Gripshover	University Hospitals	Part A Funded Agency
Alisha Jimenez-Thompson	Nueva Luz	Community Member
Kimberlin Dennis	Community Member	Planning Council - Consumer Representative
Jason McMinn	MetroHealth	Planning Council - QI Representative
Robert Watkins	Community Member	Planning Council Representative
Myrtle Watson	ORCA House	Community Member
Ashley Hollohazy	MercyHealth	Community Member
David Smith Jr.	DSAS	Community Member
Melissa Rodrigo	Cuyahoga County Board of Health	Ryan White Part A Office
Kate Burnett-Bruckman	Cuyahoga County Board of Health	Ryan White Part A Office
Vino Sundaram	Cuyahoga County Board of Health	Ryan White Part A Office

Meeting Minutes:

1:00 – Welcome and Introductions/Ice Breaker

1:20 – CQMC Updates – Kate Burnett-Bruckman
- Kate reviewed 2017 chart abstraction and CAREWare outcome data.
- Presented new cascade to CQMC committee with inclusion of 'Newly Diagnosed' patient outcome point which has a different denominator than the rest of the cascade.
- Provided breakout of continuum by each service category.

1:30 – QM Plan Update – Melissa Rodrigo
- Updated 2018 QM plan summarized and presented to CQM committee.

- Covered CQM infrastructure updates, HRSA requirements for CQM program/plan, and performance measures for VLS and Retention in Care.

1:40 – QI Update Breakout Sessions
- Recent provider successes across TGA:
  - Started evening youth clinic
  - Intensive case management successful, reminder calls and transportation provided to clients proving to be helpful
  - Providing extra support to newly diagnosed patients, improving access to RNs to educate clients
  - Inclusion of case manager in the clinic has provided positive results
  - Enhancing smartphone app to make it widely used, introducing evening hours.
  - Intensive case management from supportive services shown effective.
  - Importance of continuous messaging from clinical and non-clinical providers.

2:00 – Understanding Variation Training – Kevin Garrett, CQII
- Kevin explained how variation can be applied to any situation, including viral suppression
- Demonstrated the use of a control chart.

3:00 - Policy Clarification Notice 15-02 - Kevin Garrett, CQII
- Reviewed PCN 15-02 and requirement of Recipient to implement QI projects with defined methodology, along with sub-recipients being required to complete projects, have QI programs/committees, and look at their data quarterly.

3:20 – Retention in Care Breakout Sessions
- Reviewed outcome of voting on retention measure definition from January.
- Supportive service providers discussed methods of tracking Retention in Care within their agencies, some ideas include:
  - Creating report in CAREWare to track who does and does not fall into CAREWare
  - Creating Excel spreadsheet to track retention measure
  - Acquire labs every six months to ensure clients in care, follow up with those not meeting VLS or retention measure
  - Home health aide visits every 60 days, tracked in Excel spreadsheet
- Clinical providers reviewed their own individual Part A specific treatment cascades. The group discussed:
  - Need to continue to enter clinical data even if the client switches to another payer source.
  - Common concern is that non-clinical staff are the ones entering clinical data which leaves room for error in entry. Kate discussed how Part A can provide TA to individuals entering clinical data to teach them how to run quality reports to check their work.
  - Providers agreed that the measure is not reflective of current clinical standards for suppressed individuals that may only need to be seen once a year.
  - Most agencies maintain a tracking system for clients that they have not seen twice in a year. Providers shared details of their agency tracking systems.

3:45 – Planning Council Directives, Next Steps and Wrap Up - Melissa Rodrigo

- Melissa reviewed Planning Council directives with CQM committee. The Grantees office will be reaching out to providers with more details in the weeks to come.
- Melissa reviewed due dates for the quarterly CQM reports as well as the CQMC meeting schedule for the remainder of 2018.
- **The next CQMC meeting will be held at 1:00 pm on Monday, June 18, 2018 at the Warrensville Heights County Library.**