Clinical Quality Management Committee Meeting Cleveland TGA

Monday, November 15, 2021 Meeting Minutes





Attendees:

Name	Agency/Affiliation	Representing
Brittany Pope	AIDS Healthcare Foundation	Part A Funded Agency
Joye Toombs	AIDS Taskforce	Part A Funded Agency
Brittany Hinton	Circle Health Services	Part A Funded Agency
Mary Beth Gramuglia	Cleveland Clinic	Part A Funded Agency
David Smith	DSAS	Part A Funded Agency
Allison Kloos	Far West Center	Part A Funded Agency
Anne Spelic	May Dugan	Part A Funded Agency
Jeanette Batesole	Mercy Health	Part A Funded Agency
Jason McMinn	MetroHealth	Part A Funded Agency
Dr. Lisa Navracruz	Neighborhood Family Practice	Part A Funded Agency
Kim Rodas	Nueva Luz Urban Resource Center	Part A Funded Agency
Brittany Anderson-Freese	Signature Health	Part A Funded Agency
Dr. Barbara Gripshover	University Hospitals	Part A Funded Agency
Jane Russell	AIDS Education and Training Center	Community Member
Brittany Hinton	Circle Health	Community Member
Naimah Oneal	Circle Health	Community Member
Kelly VanDerSchaegen	Cleveland Clinic Foundation	Community Member
Jeannie Citerman-Kraeger	Cleveland Department of Public Health	Community Member
Sandrell Fuller	DSAS	Community Member
Dylan Dickinson	May Dugan	Community Member
Teresa Yuzon	Mercy Health	Community Member
Xiomara Merced	MetroHealth	Community Member
Daytona Harris	Neighborhood Family Practice	Community Member
Lichelle Jennings	Neighborhood Family Practice	Community Member
Belinda Smith	Nueva Luz Urban Resource Center	Community Member
Colette Webster	Nueva Luz Urban Resource Center	Community Member
Devin McLaughlin	Nueva Luz Urban Resource Center	Community Member
Glorimar Quinones	Nueva Luz Urban Resource Center	Community Member
Jean Luc Kasambayi	Nueva Luz Urban Resource Center	Community Member
Max Enrique Rodas	Nueva Luz Urban Resource Center	Community Member
Octaveya Lowe	Nueva Luz Urban Resource Center	Community Member
Susan Yao	Nueva Luz Urban Resource Center	Community Member
Talya McNickles	Nueva Luz Urban Resource Center	Community Member
Susan DiCocco	ODH	Community Member
William Cartwright	ODH	Community Member
Jeanne Stride	Signature Health	Community Member
Liz Schaefer	Signature Health	Community Member
Sherriè White	Signature Health	Community Member
Kate Burnett-Bruckman	University Hospitals	Community Member
Zach Levar	Cuyahoga County Board of Health	Ryan White Part A Office
Vino Panakkal	Cuyahoga County Board of Health	Ryan White Part A Office
La'Keisha James	Cuyahoga County Board of Health	Ryan White Part A Office
Danielle LeGallee	Cuyahoga County Board of Health	Ryan White Part A Office
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1:00-1:10 - Welcome, Introduction

- Zach Levar and La'Keisha James-Cleveland TGA

1:10-1:20 - Icebreaker

-All CQMC members introduced themselves-agency, name and fun fact

1:20-1:35 - Updates, Data, Survey Results

Updates: Zach Levar

-Zach discussed transition to La'Keisha James moving forward as lead of CQMC.
-Site visit findings from September 2021
-QIP's will be more collaborative across service categories
-More frequent CQMC meetings to provide more updates

CQMC Needs Assessment Survey Results: La'Keisha James

-58% were somewhat or not familiar with implementing QI tools

-58% had little to no experience completing QI projects other than their activities through Part A

-92% were somewhat or not familiar with PCN 15-02

-56% felt core service categories would be most beneficial as a regional QIP (specifically OAHS, MCM,

Oral Health) -psychosocial mentioned as a category of interest in Support

CDC Care Continuum: Zach Levar

-Explained CDC Care Continuum definitions and data for Cleveland TGA; CDC continuum definitions were required by HRSA for FY2022-2024 grant application

Overall TGA Data: La'Keisha James

-Discussed Part A client Demographics (see slides 11-13)

-Transgender: There has been a downward trend since Q3 2020, resulting in an 11% decrease in VLS. -AALW: Although there have been slight variations, the percent has remained slightly lower than baseline in 2018. -MSM of color: Trends over time have remained relatively stable, but we have noticed slight improvements from a low in Q3 2020 until now. Q3 2021 is equal to 2018 baseline.

Target population overlay

-Four CQM Target Populations: Transgender, youth (13-24), AALW, MSM of color
-Presentation slides display line graph of how they have trended over approximately last 2 years.
-La'Keisha asked attendees to continue tracking data through December 31, 2021 to assess accurate trends.

CY2021 QI project progress

- Overall QI progress from 47.5% to 70.2% through Q3



1:35-2:25 - QI Project Presentations

AIDS Healthcare Foundation

-Target population- All Part A clients

-Aimed to improve VLS for all Part A clients from 52%-65%

-Conducted an analysis on current barriers non-VLS clients faced

-Began intensive outreach workgroup to task with activities that ultimately lead patients back into care

AIDS Taskforce of Greater Cleveland

-Target population-non VLS MSM of color who are newly diagnosed or not in care.

-Aimed to reduce VLS to undetectable levels within 6-9 months of entering the program

-Initial intake and assessment is done by Case Manager. Referrals made as appropriate.

-Case manager schedules to meet with client weekly until client reaches undetectable viral load count.

Circle Health

-Target population-All Part A clients
-Aimed to improve VLS for non VLS clients from 0% to 50%
-Completed barrier tool questionnaire to identify barriers to care that impact adherence to treatment recommendations and engagement in care.
-Through intensive case management, VLS improved to 61% at end of Q3

Cleveland Clinic Foundation

-Target population -Part A MCM clients -Aimed to increase VLS from 71% to 76% -Analyzed barriers to care and implemented process improvements: increased signage regarding labs, outreach, maps, enhanced excel functionality -Q3 VLS improved to 87%

DSAS

-Target population- All Part A clients

-Aimed to increase VLS from 92% to 96%.

-Bi-weekly telephonic and email messages were recorded and sent to PLWHA about food assistance, financial assistance, utilities, etc. and 65%-75% were regularly listening to messages. The remaining 25%-35% may go to voicemail or were unanswered.

-Q3 VLS increased to 92.8%

Family Planning of Lorain

-Target population-All Part A clients

-Aimed to strengthen the community by providing accessible reproductive healthcare and education services.
-RW Coordinator reviewed referrals and with FPS volunteer expanded the list and confirmed contact information.
Referrals were then developed into a booklet and submitted for review and approval by CAB committee.
-Booklet is given to each Early Intervention patient and is distributed to other Lorain County RW Part A providers, and updated to FPL website.



Far West

-Target population- All Part A clients

-Aimed to understand the pandemic's impact on a patient's thoughts, values and beliefs that might lead one to decline the covid vaccination

-Narrative data included feelings of powerlessness, hopelessness, helplessness and fear, however 80% of participating clients had already been vaccinated

<u>2:25-2:30 – Break</u>

2:30-2:40 - Trivia (Cleveland Themed) winners

-Dylan Dickinson - May Dugan -Jason McMinn - MetroHealth -Sherrie White - Signature Health

2:40-3:25 - QI Project Presentations (continued)

<u>May Dugan</u>

-Target population- All Part A clients

-Aimed to maintain VLS for HIV+ mental health clients at 100%

-Relationship development and engagement flow chart implemented to operationalize rapport, new perspective and connections of new practitioner. Adjustments are made as necessary for clients

-Q3 VLS is at 100%

Mercy Health

-Target population-All Part A clients

-Aimed to give smaller population of patients "one on one" tools and support to overcome barriers that prevent proper care and VS

- Developed a flow sheet that addresses and plans to overcome each barrier agreed upon by patient and medical care team

- Q3 VLS is 94%

<u>MetroHealth</u>

-Target population- All Part A client -Aimed to improve VLS for non-VLS concerned clients from 0% to 30% -Outreach workflow is monitored monthly by medical team and updated as needed. Patient EPIC list is now part of day-to-day activities.

- Q3 VLS is 38%

Nueva Luz URC

-Target population-MSM of color

-Aimed at improving VLS in selected population from 0% to 50% by December 31, 2021

-Held regular internal meetings to track and address non-VLS list and develop action steps to remove barriers to care

- Q3 VLS is 42%



Signature Health

-Target population-All Part A clients

-Aimed at linkage to care to improve VLS for Behavioral Health participants from 93% to 100%

-Developed a referral system for MCM to set up behavioral and mental health appointments with internal/external providers; tracked compliance through first appointment

-Q3 VLS is 93%

University Hospitals of Cleveland

-Target population- All Part A clients

-Aimed at improving the following by December 31, 2021

- increasing the number of newly diagnosed individuals receiving ART their 1st visit from 29% to 35%
- increasing the number of newly diagnosed receiving at least 3 medical visits in the 1st year from 90%-92%
- increase the number of Rapid linkage patients that are VS by the 6th month marker from 88% to 92%

-Improved communication with Emergency Department; improved system flow within SIU

-Q3 overall data:

- 89% started meds the same day the saw an SIU provider
- 42% have had at least 3 or more visits in 6 months (in progress)
- 100% were VS within 6th month of diagnosis and Rapid linkage

Neighborhood Family Practice

-Target population-All Part A clients

-Aimed at improving VL for non-VLS clients from 0% to 30%

-Analyzed draft of variables for non-VLS patients through data obtained during office visits and initial Psychosocial assessments

-Non VLS clients remained hard to reach, follow up analysis did not yield anticipated correlation to improve suppression for YTD 9/87 patients

3:25-3:45 - Next Steps, Adjourn, Questions

-Data collection for Q4 of 2021 projects

• Submission due early January to Part A office

-Look out for email to set up 1st quarter meeting to discuss 2022 project set up

-Slide deck/minutes will be emailed to CQMC soon

-Also can be found at https://www.ccbh.net/ryan-white-provider-resources/

