

# Tarrant County Quarterly Quality Management Meeting

Monday, January 25, 2022

**Presenters:** Kaitlin Lopez, Collaborative Research: Melissa Rodrigo and Thomas Rodriguez-Schucker

## **Attendees:**

AA: Lisa Muttiah, Renee Thomas, Karmella Pettigrew, Dulce Lozano

Ashley Campbell- Grant and Prospect Research Coordinator, JPS

Carla Storey- Director of Programs, SAM

\*\*\*\*- PC Liaison and Community Advocate

Kianna Cureaux- Lead Case Management Specialist, SAM

Stephanie Cagle- Director of Client Services, AOC

Demi McDowell- Practice Administrator, CAN

Ruth Keating- Clinic Supervisor, PMC

Dani Cameron- Project Manager, JPS

I. **Welcome and Intros** – start at 11:00 AM

## II. **2022 QM/QI Expectations**

- MR and TRS presented what Quality Management looks like in the scope of HRSA and Part A
- Part A looks at Quality Assurance as an Administrative function measuring compliance, with a focus on outliers
  - o Ex: Creating a care plan every six months
- Quality Improvement is about continuously improving the entire system
  - o EX: Focuses on the outcomes of updating a care plan
- Quality Improvement focuses on the improvement of care, testing what is observable with sequential tests
- Two Dimensions of Quality
  - o Technical- Provider perception of Quality of HIV cares
  - o Experience Quality- Consumer perception of quality of HIV Care
- Discussed how a process may fail
  - o Poor designs, Not well understood by those who work on them, not set up to deliver what is required, and too complex
- CR mentioned that a QM lead is the only person involved in the process, it is important for every member of the team to take an active part in the project
  - o “Achieve continual improvement through small, incremental changes
  - o CR states to continually talk about the project, do not let it go to the wayside
- CR recommended using your resources, it’s okay to share with other agencies your success stories
- CR mentioned the HRSA is our federal banker
  - o Policy Clarification 15-02 establishes the parameter of the CQM program and QI activities
- CR listed the program components for Quality Management
  - o Specific aims based on health outcomes

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- Support by leadership
- Accountability for CQM activities
- Dedicated resources
- Use of data measurable outcomes to determine progress and make improvements to achieve them
- CR went over what an AIM statement is
  - AIM Statement: A written statement of the accomplishments expected from the improvement effort
    - Example: By December 3rd, 2022, Sun Health will improve VLS for all Part A clients from 93% to 95%
    - What systems will be improved
    - What should we expect to happen?
    - What populations should we focus on?
    - How much?
    - By when?
  - Make it measurable and achievable
    - Ex: SMART goals
      - Specific
      - Measurable
      - Attainable
      - Realistic
      - Timeframe
  - Why set up SMART Goals?
    - You take control of your life
    - You focus on the important things
    - You will make good decisions
    - You can finish the task efficiently
    - You will be self-confident and enthusiastic
    - You will make progress
    - You are closer to success
- CR provided multiple relatable examples of AIM statements and corresponding SMART goals
- CR went over PDSAs
  - Plan
  - Do
    - Carry out the plan
  - Study
    - Observe the data you obtained
  - Act
    - Based on the results, what changes are you going to make?
- CR share the presentation with Kaitlin and Kaitlin will share this presentation with agencies

### III. Involvement of PLWH in Subrecipient QM Committees

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## IV. CQII Updates

- Kaitlin provided an update on the CQII collaborative project.
  1. Black women 18-39
  2. Transwomen
- ii. The numbers have gone down

## V. QI Project/ Performance Measure Goal Updates

- Kaitlin reminded everyone that every agency needs to do two QM projects every year
  - i. Kaitlin mentioned that the CQII collaborative can count toward one of the required projects
- Kaitlin reminded everyone that CQM plans are due 2.25.2022
  - i. It must have two QIP
  - ii. Must engage with PLWH
  - iii. One QIP must focus on Viral Load and Retention
    1. CQII does monitor these two measures
  - iv. Must identify performance measures that will be monitored and tracked for 2022

## VI. Committee Business

- Kaitlin reminded everyone that the AA will be hosting Technical Assistance for anyone who needs help with Quality Management
  - i. Kaitlin will send out a survey next week with a list of topics that will be taught
- Kaitlin will be sending out a survey to the QM committee for TA suggestions and feedback on which Quality Improvement projects the AA should focus on for this year
- Kaitlin offered TA for anyone who wants help writing their CQM Plan
- Kaitlin informed everyone that the AA will be hosting a training this Thursday with their CAB and encourages any agency CAB members to attend the training
- Brandon asked the agencies if they knew any clients that they think would be good advocates, and to please send them his way

## VII. Action Plan

### Open discussion-

- No questions were asked