

RYAN WHITE CLINICAL QUALITY MANAGEMENT PROGRAM REQUIREMENTS

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September 19, 2019

Email us! 

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WHAT IS QUALITY MANAGEMENT?

- Quality management ensures that an organization, product or service is consistent. It has four main components:
 - Quality Planning (QP)
 - Quality Control (QC)
 - Quality Assurance (QA)
 - **Quality Improvement (QI)**



DIFFERENCE BETWEEN QA AND QI

	<i>Quality Assurance</i>	<i>Quality Improvement</i>
Motivation	Measuring compliance with standards	Continuously improving processes to meet and exceed standards
Strategy	Reactive – “fixes” identified problems	Proactive – prevents problems by creating and refining processes
Means	Inspection	Prevention
Focus	Corrective action for Individuals	Implementing and improving Processes and Systems
Responsibility	Quality Staff, Management	Everybody!

WHAT IS QUALITY IMPROVEMENT?

Quality improvement QI consists of systematic and continuous actions that lead to measurable improvement in healthcare services and the health status of targeted patients groups. The Institute of Medicine (IOM), which is a recognized leader and advisor on improving the Nation's health care, defines quality in health care as a direct correlation between the level of improved health services and the desired health outcomes of individuals and populations.

Reference: <https://www.hrsa.gov/sites/default/files/quality/toolbox/508pdfs/qualityimprovement.pdf>

WHY IS QUALITY IMPROVEMENT IMPORTANT?

- It directly impacts our consumer's lives and they deserve our best efforts
- It can help us reach organizational goals
- It has an overall benefit to communities and regions
- It can make the job or task more streamlined, enjoyable, and meaningful
- **Its mandated by the Health Resources & Service Administration HIV/AIDS Bureau (HRSA HAB) – legislation and Policy Clarification Notice 15-02 (PCN 15-02)**

HAB EXPECTATIONS FOR QUALITY IMPROVEMENT

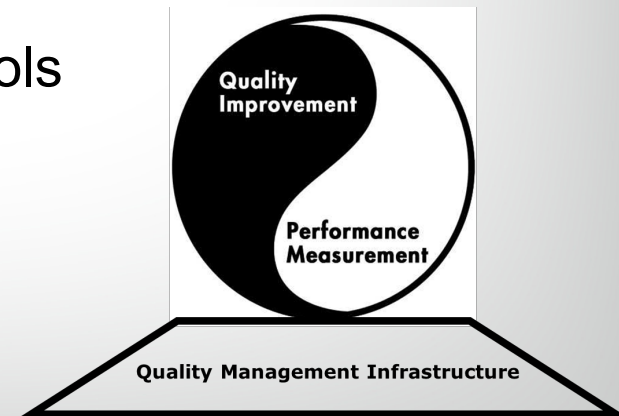
- Must implement quality improvement activities aimed at improving ***patient care, health outcomes, and patient satisfaction***.
- Must use a defined approach
 - Defined approach infers systematic evidence informed methodology
- You review your data quarterly and you analyze it
- Act on your data – Improvement means just that, improve the results you're getting and do better next time

THE QUALITY IMPROVEMENT CONCEPT

- Quality improvement is a continuous process
- Quality improvement is the systematic implementation of small incremental changes to achieve goals.
- Quality improvement is part of an overall quality program
 - **Quality improvement is a habitual practice and a mind set**
 - **Quality improvement addresses a single problem or process at a time**

THE QUALITY PROGRAM

- HAB calls the quality program for Ryan White recipients the Clinical Quality Management (CQM) Program
- It's composed of a multi-disciplinary team
 - It may have multiple quality improvement committees to execute projects
- The program writes a plan and establishes measures
 - It analyzes the measures and uses them to guide QI activities
- It conducts QI Projects
 - Using a defined methodology and QI tools



WHAT DOES THIS MEAN FOR US?

- Recipient (HAHSTA) needs to ensure that their subrecipients (You) provide services that have the:
 - **Capacity to contribute to the recipient's CQM program**
 - **Resources to conduct CQM activities in their organizations**
 - **Ability to implement a CQM program in their organizations**



SO WHAT SPECIFICALLY DO WE NEED TO DO?

- HAHSTA provides subrecipients with a CQI coach, access to Ryan White HIV/AIDS Program Center for Quality Improvement and Innovation (CQII), and regional quality resources/learning opportunities.
- HAHSTA requires subrecipients to have a Quality Program and participate in Regional Quality improvement initiatives. This includes your accomplishment of following activities:
 - QM Plan
 - Quarterly Quality Measures
 - QM Committee
 - Quality Improvement Projects
 - Consumer Involvement/Satisfaction
 - Learning Collaborative
 - Evaluation & Assessment



QM PLAN

- The QM plan is due to your coach 30 days after the grant year begins. Please submit it RW.Quality@dc.gov
- Your QM Plan will be reviewed and feedback will be given to you, it needs to have the following elements:
 - **Quality Statement:** Vision
 - **Quality Committee Structure:** Leader, roles and responsibilities, resources etc.
 - **Measure Portfolio and Outcomes:** Data
 - **Goals and Objectives:** SMART goals
 - **QI projects and activities:** Documented with appropriate tools
 - **Engagement of stakeholders:** Meaningfully involved
 - **Workplan:** detailed action steps



MEASURES

What service categories need measures?

Percent of RWHAP eligible clients receiving at least one unit of service for a RWHAP-funded service category	Minimum number of performance measures
>=50%	2
>15% to <50%	1
<=15%	0

- Measures need to be reviewed by your team and submitted to your coach at least quarterly
- HAHSTA measure portfolio currently under revision
- We will be soliciting subrecipient input as to the mechanism of submission once the portfolio is set

THE QUALITY COMMITTEE

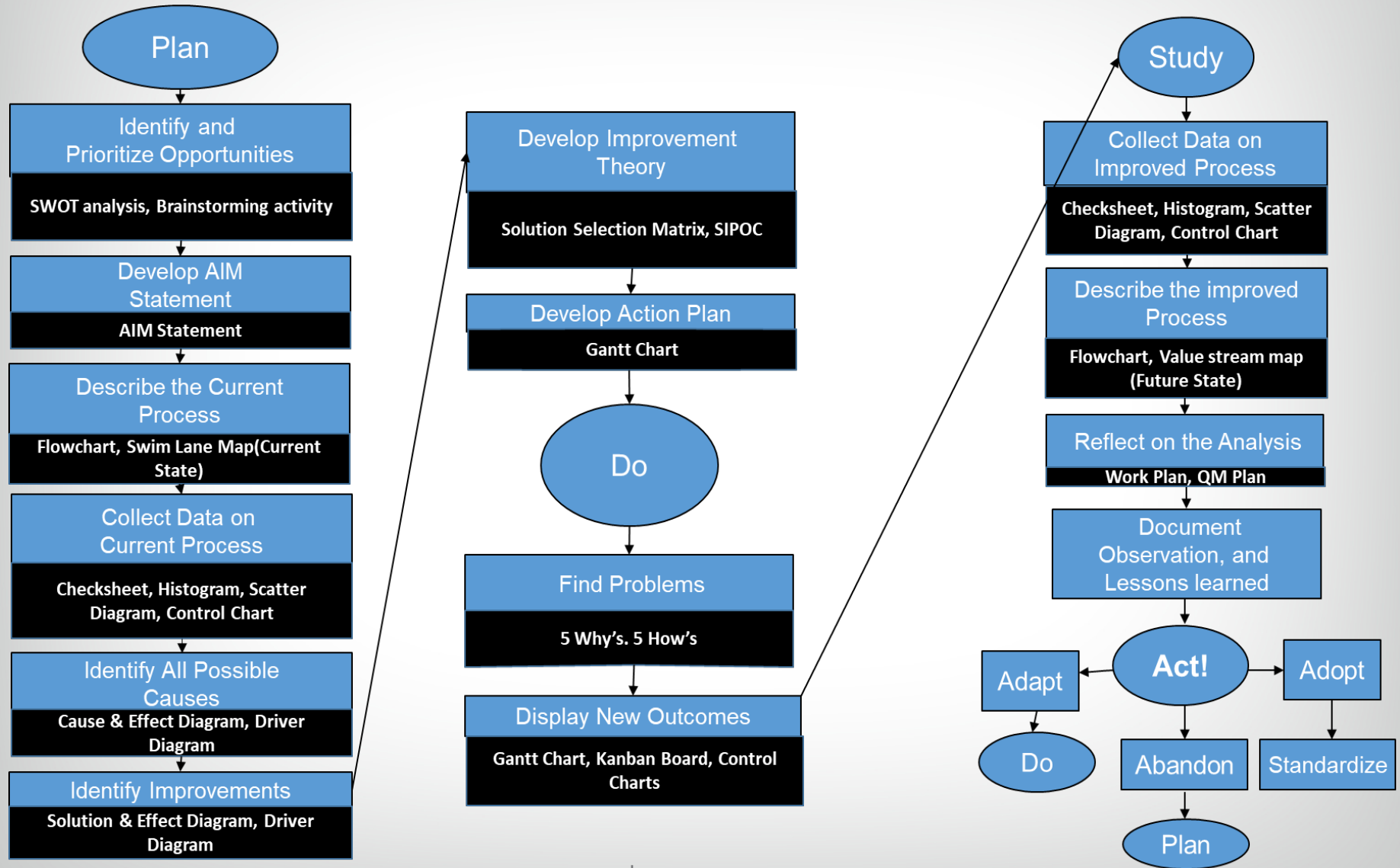
- May be part of the overall quality program
- In smaller organizations, your team may be small—but you still have to have a team!
- It reviews data and the quality management workplan at least quarterly
- It executes improvement activities using a defined methodology based on available data



QI PROJECTS

- At least one (1) QI project active throughout the year.
- The program must document it's QI projects including, but not limited to:
 - PDSA worksheets
 - QI Tools
 - Data dashboards
 - Storyboards/posters etc.

QI PROJECTS



CONSUMER SATISFACTION SURVEY

- Participation is mandatory as improving consumer satisfaction is a key tenet of Ryan White quality improvement.
- In addition to complying with survey completion, the results should be used to improve consumer satisfaction and health outcomes
- The results for the CSS 2018 has already been shared with Providers.
- The survey in CSS 2019 will be conducted quarterly and will focus on **customer service, client experience** and **needs assessments** results of which we believe we drive our improvement efforts and initiatives.
- HAHSTA in conjunction with the Maryland Department of health has made the survey more streamlined, efficient, and accessible to clients.

LEARNING COLLABORATIVE

- Current EMA-wide focus on ***end+disparities ECHO learning collaborative***
 - Women of Color
 - MSM of Color
 - **Youth**
 - **Transgendered Individuals**
- All subrecipients are welcome and encouraged to participate in this groundbreaking national effort

Mission of the end+disparities ECHO Collaborative

“To promote the application of quality improvement interventions to measurably increase viral suppression rates for four disproportionately affected subpopulations of people living with HIV among Ryan White HIV/AIDS Program-funded providers.”

EVALUATION AND ASSESSMENT

- **Organizational Assessment**

- ❖ New OA format for clinical sites and non-clinical sites

- **QM Plan Workplan**

- Keep an ongoing record of:
 - ❖ Action Steps
 - ❖ Owner
 - ❖ Timeframe
 - Compare annual quality goals with year-end results
 - Use findings to plan next year's activities; learn and respond from past performance

- **Data Analysis**

- Run Charts, control charts, data dashboards, storyboards, etc.

ROLE OF COACHES



- **Assessment**
 - Review QM Plan and minutes
 - Site visits; Gemba walks
 - Conduct Organizational Assessment
- **Capacity Building**
 - Training on QM topics with a focus on QI methodologies and tools
- **QI Project Coaching**
 - Facilitates QI projects with a focus on measurement and improvement
 - Provides technical assistance in using tools and participating in collaborative activities
- **Evaluation**
 - Analyze data for improved Clinical Outcomes
 - Gauges progress in meeting OA goals
 - Gather qualitative data via survey from staff and consumers

Quiz Time

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WHAT DOES CQM STAND FOR (HAB DEFINITION)?

- A. Continuous Quality Management
- B. Clinical Quality Management
- C. Consumer Quality Measurement
- D. Categorical Quantum Mechanics

B. Clinical Quality
Management

CQM PROGRAM ACTIVITIES SHOULD BE AIMED AT IMPROVING (FROM PCN 15-02)?

- A. Patient Satisfaction, Health Outcomes, and Patient Care
- B. Cost Savings, Employee Efficiency, and Safety
- C. Clinical Guidelines, Service Standards, and Corrective Action Plans
- D. The amount of \$ on our award next year

A. Improved patient satisfaction, health outcomes and patient care

WHICH IS AN EXAMPLE OF QI?

- A. Doing a chart audit
 - B. Writing a grant for a new telemedicine intervention
 - C. Creating a new process for reaching unsuppressed patients in the event of a no show
 - D. Creating a new data visualization with RSR completeness and HAB Measures
- C. Creating a new process for reaching unsuppressed patients in the event of a no show

WHICH IS NOT A REQUIRED COMPONENT OF A RYAN WHITE QUALITY PROGRAM?

- A. Quality Committee
- B. Data Measurement
- C. QI Projects
- D. Quality Assurance

D. Quality Assurance

WHICH IS NOT A QUALITY IMPROVEMENT METHODOLOGY?

- A. Model for Improvement (PDSA Cycle)
- B. The Quality Management Plan
- C. Lean
- D. Six Sigma

B. The Quality Management Plan

WHICH IS AN ACCEPTABLE MEASURE FOR A QM PROGRAM?

- A. Viral Load Suppression
- B. Consumer Satisfaction
- C. Housing Status for persons of Transgender lived experience
- D. All of the above

D. These all appropriate measures depending on the goals of your program.

DOES EVERY SERVICE CATEGORY FUNDED HAVE TO REPORT CLINICAL OUTCOME DATA?

- A. Yes
- B. No
- C. HRSA has never addressed this
- D. This is a trick question

B. No.

QUESTIONS?

**THANK YOU FOR YOUR TIME AND COMMITMENT
TO QUALITY!**



CQI COACHES

TOM OGUNGBEMI	LAURA WHITTAKER	KHALIL HASSAM	JOSE DELAO HERNANDEZ
Children's National Medical Center CNMC	Damien Ministries	Access AWPLI	AIDS Healthcare Foundation
Fredericksburg Area HIV/AIDS Support Services FAHASS (VA)	Institute of Public Health Innovation IPHI	Community Family Life Services	Casa Ruby
Greater Baden Medical Services	Mary Washington Healthcare	Andromeda Transcultural Health	HIPS
Heart to Hand	Mary's Center	Family & Medical Counseling Services	Homes for Hope
Howard University CIDMAR	MedStar Health Research Institute	Food & Friends	La Clinica del Pueblo
Shenandoah Medical Valley System	Metro DC Community Center	Inova Health Care Systems	Neighborhood Health
US Helping US	Metro Health	Josephs House	Nova Salud
Virginia Health Options	Montgomery County HD	Terrific Inc	Prince George's County HD
Washington Health Institute	SLK Health Services	Whitman-Walker Health	United Medical Center
ADAP	The Women's Collective Restoration Community Alliance	Health & Wellness Center Housing Counseling service	Unity Healthcare

CONTACT INFORMATION

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