METROPOLITAN ATLANTA HIV HEALTH SERVICES PLANNING COUNCIL

Quality Management Committee Grady IDP 341 Ponce De Leon Ave Atlanta GA March 3, 2016 10am-12pm

Members	Members		
Nicole Roebuck(Chair) AID Atlanta (P)	Pamela Phillips RW Office Part B (P)		
Trevor Pearson(Co Chair) Consumer Caucus (A)	Michael Coker RW Office Part B (P)		
Latonya Wilkerson (D) AID Atlanta(P)	Denise Zeigler City of Atlanta HOPWA (A)		
Sharon Kricun (D) Positive Impact (P)	Spencer Burton-Webb City of Atlanta HOPWA (P)		
Ryan Woodbury (D) ANIZ (P)	Laura Carter Williams, (D) Grady IDP (P)		
Stefanie Sparks (D) AIDS Legal Project (P)	Sanjay Sharma Grady IDP (A)		
Sonya Wilson/Kim Douglass (D) Cobb BOH (P)	Suzette Thedford, DeKalb BOH (A) (P)		
Nordia Edwards (D) Emory Midtown (A)	Michael Banner(D) Here's to Life (P)		
Jennifer Creighton, Fulton BOH(D) (P)	Deborah Swinford/Jan Grissom (D) Clarke County (A)		
Lisa Roland (D) Grady IDP (A)	Evan Pitts/ Marxavian Jones NAESM (A)		
Aleta McClean/Kayla Anderson (D) Open Hand (A)	Deb Bauer (D) RW Office Part D (P)		
Heather Wademan (D) Positive Impact (P)	David Holland, Emory (A)		
Patricia Parsons/Latesha Whisby (Mercy Care) (P)	Melissa Beaupierre Grady IDP (A)		
Beatriz Ramos/Stacy Coachman (D) Clayton	Joseph Lynn, RW Part A (A)		
County BOH (A)			
Patrick Daly?Brian Edwards(D) AIDS Healthcare	Yayne Fekadu, Georgia DPH (A)		
Foundation (P)			
Bridget Harris Ryan White Office Part A (P)	Adron Shepard(D) Recovery Consultants (P)		
Sandra Vincent RW Office Part A (A)	Sean McIntosh, GA AETC (Morehouse) (P)		
Michelle Fleetwood –RW Office Part A (P)			
Sambrero Browning, RW Planning Council(P)			

Absent (A) Present (P)

QUORUM: {The presence of (3) active members of the Committee, Caucus, or Task Force shall constitution quorum}	ute a
Yes x No	w:
CALL TO ORDER:	

Meeting was called to order at 10:00 am.

APPROVAL OF AGENDA:

See attached copy

Motion:	
Motion to appro-	ve the agenda was passed unanimously
Votes For:	Motioned by: Michael Coker
Votes Against:	Seconded by: Ryan Woodbury
Changes/Addition	ons: none

APPROVAL OF MINUTES:

Meeting Date: Ma	rch 3, 2016	
Motion made to ac	ecept the 3/3/16 minutes were passed unanimously.	
Votes For:	Motioned by: Heather Wademan	
Votes Against: Seconded by: Sharon Kricun		
Changes/Additions	s: None	

AGENDA ITEM #_1___ AGENDA ITEM: Welcome and Introductions
{Insert Agenda Number and Item, ex. A. B. C., I. II. III., 1. 2. 3. – Indicate "Old" or "New" Business with a check mark}}

Brief Summary of Discussion: New guests/members include:				712	Old Business	
				Ne Bu	ew Isiness	
Motion: {If agenda item does not require a motion, indicate by noting "N/A"}N/A						
Action to be	e taken:N/A					
# of Votes For:	# of Votes Against:	Motioned By:		Motion Passes	Motion Fails	
		Seconded By:				

AGENDA ITEM # 2 AGENDA ITEM: 2016 QM WORKPLAN REVIEW AND PROGRESS UPDATES

[Insert Agenda Number and Item, ex. A. B. C., I. II. III., 1. 2. 3. – Indicate "Old" or "New" Business with a check mark}}

Goal 1A: Grantee (Bridget Harris) Reported that the QM Plan will be completed with the needed revisions by our April 7 th , 2016 meeting. Goal 2A: End of year RW Part A site visits to agencies are still on schedule for March and April 2016. QM portion of the site visit will focus on review of progress to date on Corrective Action plans devised by each agency in response to areas of improvement needed.	*	Ol d Bu sin ess X
Goal 2B: QM Committee completed review of Peer Counseling standards during this meeting. The committee started the review of the Patient Navigation Standards and should be completed by the April QM committee meeting. The plan is still to complete development of the Medical Transportation standards in April as well. Upon review of the existing Peer Counseling Standards document, the following recommended changes included:	New Busine X	ess
 Remove all references to "certified" peer counselor in the document as there is no State or county regulation for having certified peer counselors to provide RW services 		

- 2) Remove Crisis Management paragraph on Page 1 of the document as this is already stated in the body of the standards itself.
- 3) Replace all references of Site Visit to Program Monitoring instead
- 4) Section I.F added for 1 hour individual or group sessions for clients in need of mental/emotional support.
- 5) Section 1G removed reference to certification process. Kept 40 hours of training to include all the topics listed on the document **except for** Infection Control, Empowerment of Peers, General understanding and current contact information for the local HIV/AIDS, and Volunteer/employee rights and responsibilities(that should be a normal part of all agencies' employee/volunteer onboarding process)
- 6) Add Section I H. "Agency is contractually required to maintain documentation of the following which shall be made available to the grantee and the Health Resources Services Administration (HRSA) upon request and during Ryan White site visits. 1) Document the provision of psychosocial support services including: a) Types and level of activities provided b) Client eligibility determination
- 7) Section II.A. add "To the greatest extent possible peer staff and peer volunteers re HIV positive." (Grantee to confer with Atlanta Legal Aid about this language to ensure that there are no HR repercussions)
- 8) Section IIG change "2 hours" to "1 hour" of monthly supervision.
- 9) On Page 6 move Section III, IV and V to the beginning of the standards to align with the formatting of the other
- 10) Section VC. Revise sentence to read "An up to date release of information form exists and is signed by the client when his or her information is shared externally of the agency."

Goal 3A: QM committee will need to establish indicators for each additional standard of care developed, ie for Peer Counseling, Patient Navigation, Medical Transportation, and Child Care.

Goal 3B: RW Office is monitoring progress through site visit reviews. The RW Office did present recent results of the EMA's performance on HAB measures for the 2015-16 grant year which was inclusive of CAREWARE only data. One concern was about the PCP Prophylaxis measure where the EMA indicates only 28% of EMA clients receiving PCP Prophylaxis. They weren't sure what may explain this especially since in 2010 and 2014, the results were 92% and 85% respectively. One recommendation made again to the Grantee's office was to have a clear CAREWARE mapping tool that explains exactly where data must be entered for each HAB Measure. Grantee's office will be creating such a tool for agencies to use. Another area discussed included capturing the oral health exams in CAREWARE regardless of what funding source may have paid for the OH Exam. So for example if a patient received an OH exam through their Medicaid provider, this information is not captured in CW, however in reality the patient did have an OH exam and it should be reflected. If not it would falsely lower the compliance rate of our clientele. This could be said for other HAB measures such as Cervical Cancer screenings, Nutrition counseling that may have been provided to the patient without using RW Part A funds. The grantee indicated that they would take this under consideration for further discussion. Through the ongoing site visits, the grantee will evaluate each agency's performance on the HAB Measures and determine on an agency level what may some of the challenges being faced in meeting some of the benchmarks. For some agencies it may be a capacity issue, a data entry issue, lack of staffing issue, CW issue, etc. The grantee's office intends to have data from the site visit reviews available for the QM Committee to review at the June 2016 QM meeting.

WorkPlan	(Goals 4A,4I	the QM Committee tabled the remaining review of the S, 5A and 5B) in order to complete the Peer Counseling the on those remaining goals at the next meeting in A	ing	
Motion: {If N/A	agenda item (does not require a motion, indicate by noting "N/A"}	•	
Action to be	e taken:			
# of Votes	# of Votes	Motioned By:	Motion	Motion
For:	Against:	Seconded By:	Passes	Fails
ert Agenda N a check mar	Number and It	A ITEM: Part A updates em, ex. A. B. C., I. II. III., 1. 2. 3. – Indicate "Old" or "I ssion:		old
 Mo Feb 	tivational Inte ruary.	rviewing Training was provided to all funded agencies in aining will take place on April 26 th and 27 th . Training will	N	usiness
incl	lude how to sc	an documents into CAREWARE.	В	usiness
doc	uments into C	eduled to receive scanners in order to scan eligibility W for the purpose of reducing clients having to present the	ne	
		ocuments to different RW agencies. aft of the Integrated Plan will be available. There will be a	a	
rev	iew period of t	the plan in May. QM Committee should be prepared to also regarding the plan.		
Motion: {If	agenda item (does not require a motion, indicate by noting "N/A"}N/A	4	
Action to be				
# of Votes For:	# of Votes Against:	Motioned By:	Motion Passes	Motion Fails
1.311	rigamot.	Seconded By:		
ENDA ITEM # 4 AGENDA ITEM: <u>Part B updates</u> ert Agenda Number and Item, ex. A. B. C., I. II. III., 1. 2. 3. – Indicate "Old" or "New" Business a check mark}}				
	nary of Discu	ssion: since the Patient Access Network (PAN) Program which	i	
assi	isted clients w	ith copay assistance for their medications has run out of		lew
		ADAP program will pick up clients who are in need of y assistance going forward.	В	usiness
2. Par	t B is reviewir	ng its QM Plan and Workplan and will be finalizing. They ecific QI initiatives that the Districts will participate in or		
the	next year.			
3. The	ey are also con	ducting their Clinical and Case management chart review	/S	

	ove	r the next few	months.				
	Motion: {If agenda item does not require a motion, indicate by noting "N/A"}N/A						
	Action to be taken:						
	# of Votes # of Votes Motioned By:						
			Seconded By:		Fails		
			A ITEM: Part D updates				
- 25	ert Agenda N a check mar		em, ex. A. B. C., I. II. III., 1. 2. 3. – Indicate "Old" or "I	Vew" Bus	iness		
	1.		king on it's non-compete application which is due.				
			M meeting is on March 14, 2016	N	ew		
	3. They were happy to report that they initiated a PDSA QI improvement project to improve the number of mothers that were being linked into medical care post partum. Prior to the QI project, they had a 72% linkage rate. However in the last quarter (November-January), they now have a 100% linkage to care rate for all mothers post-partum!						
	Motion: {If	agenda item a	loes not require a motion, indicate by noting "N/A"}N/A		:		
	Action to be	taken:					
	# of Votes For:	# of Votes Against:	Motioned By:	Motion Passes	Motion Fails		
	101.	7 igumot.	Seconded By:				
{Inse	AGENDA ITEM # 6 AGENDA ITEM: New Business/Announcements {Insert Agenda Number and Item, ex. A. B. C., I. II. III., 1. 2. 3. – Indicate "Old" or "New" Business with a check mark}}						
		nary of Discus None indicate					
					ew usiness		
	Motion: {If agenda item does not require a motion, indicate by noting "N/A"}N/A						
	Action to be	taken:					
	1999/95	# of Votes	Motioned By:	Motion	Motion		
	For:	Against:		Passes	Fails		
wo	VORKPLAN UPDATE: {Cut and paste segments from your Committee Workplan and provide						

WORKPLAN UPDATE: {Cut and paste segments from your Committee Workplan and provide updates in the "Progress to Date" column.}

SEE ATTACHED WORKPLAN UPDATE

NEXT MEETING DATE: April 7, 2016 NEXT MEETING TIME: 10am-12pm

NEXT MEETING LOCATION : Grady IDP	P39
Time Meeting Adjourned: 12:00 PM	

{Chair's Signature}

