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## Ryan White Clinical Quality Management Program Requirements

Tom Ogungbemi and Laura Whittaker  
Quality Management  
February 16, 2022

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### What is Fee for Value (FFV) ?

- Shift from Fee-For-Service (FFS) to Fee-for-Value (FFV)
- Quality is one of the core tenets of FFV
- Emphasis placed on the quality of care, rather than the quantity of services provided
- Redesign Capacity Assessment Tool (RCAT)
- Process and Outcome Assessments

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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)



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### Difference Between QA and QI

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

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### 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 patient groups.*

*The Institute of Medicine 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>

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### Quality Improvement is a:

- Continuous process
- Systematic implementation of small incremental changes to achieve goals
- Part of an overall quality program

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**Why is Quality Improvement Important?**

- It directly impacts our customer’s lives
- 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
- It is mandated by the Health Resources & Service Administration HIV/AIDS Bureau (HRSA HAB) – legislation and Policy Clarification Notice 15-02 (PCN 15-02)

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**What are HAB Expectations for QI?**

- Implement quality improvement activities aimed at improving *care for customers, health outcomes, and customer satisfaction*.
- Use a defined approach
  - Defined approach infers systematic evidence informed methodology
- Review your data at least quarterly and analyze it
- Act on your data

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**The Ryan White 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

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**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 CQM program
  - Resources to conduct CQM activities
  - Ability to implement a CQM program



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**What do we need to do?**

- HAHSTA provides sub recipients 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 sub recipients to have a Quality Program. This includes the following activities:
  - QM Committee
  - QM Plan
  - Quality Performance Measures
  - Quality Improvement Projects
  - Consumer Involvement/Satisfaction
  - Evaluation & Assessment



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**What is a Quality Committee?**

- Meets regularly to review performance data, identify areas in need of improvement and monitor progress
- Improvement activities should use a defined methodology based on available data
- QM workplan should be reviewed at least quarterly
- May be part of the overall quality program
- In smaller organizations, your team may be small—but you still must have a team.



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### What is a Quality Management Plan?

- QM plan is the key document for Quality Program
- QM Plan should include 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

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### QI Projects

- Must be documented
- Must include (but not limited to):
  - PDSA worksheets
  - QI Tools
  - Data dashboards
  - Storyboards/posters etc.

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### QI Projects

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**Customer Satisfaction Survey**

- Customer satisfaction is a key tenet of Ryan White Quality improvement
- Results should be used to improve customer satisfaction and health outcomes
- Participation is mandatory

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**Evaluation and Assessment**

- Quality Management Plan Workplan
  - Keep an ongoing record of:
    - o Action Steps
    - o Owner
    - o 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
  - Examples include run charts, control charts, data dashboards, storyboards, etc.

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**Role of Coaches**

- Assessment
  - Review QM Plan and committee minutes
  - Site visits; Gemba walks
- Capacity Building
  - Provide training on QM topics
- QI Project Coaching
  - Provide technical assistance
- Evaluation
  - Analyze data for improved clinical outcomes
  - Gauges progress in meeting QI goals
  - Gather qualitative data via survey from staff and customers



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### Deliverables

Frequency	Deliverable	Due Date(s)
Monthly	Client-level data in HAHSTA data system (CAREWare)	By the 10 <sup>th</sup> business day for the month being invoiced
	Expense and Reimbursement Report / Invoices (including Program Incomes)	By the 10 <sup>th</sup> business day for the month being invoiced
	Progress Report / Narrative	By the 10 <sup>th</sup> business day for the month being invoiced
Quarterly	Quality Improvement Project (QIP) Report	1 <sup>st</sup> Quarter July 1 2 <sup>nd</sup> Quarter October 1 3 <sup>rd</sup> Quarter January 1 4 <sup>th</sup> Quarter April 1
Bi-Annually	Ryan White Services Report (RSR)	1 <sup>st</sup> Submission: last Thursday in August 2 <sup>nd</sup> Submission: last Thursday in February
Annually	Business Associate Agreement / Data-Sharing Agreement	Within 30 days from the beginning of the Program Year
	Quality Management Plan	Within 60 days from the beginning of the Program Year
	Annual (Closeout) Report Narrative	30 days after the end of the Program Year
	Data Improvement Project	30 days before the end of the Program Year

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### Questions?

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