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Ryan White Program Provider Report Card

External Standard Operating Procedures Policy Review

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Agenda for Today

- ► Purpose of Report Cards
- ► Review of the Report Cards' External Policy
- ► Role of Sub-Recipients
- ► Present Report Card Template
- ► Next Steps
- ► Questions

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REPORT CARD EXTERNAL SOP

PURPOSE OF REPORT CARDS

- Provide Ryan White Sub-recipients with an objective comprehensive tool that measures performance and provides feedback on service delivery and administrative operations.

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PROVIDER REPORT CARDS

- Who
  - Ryan White Sub-recipients
- Purpose
  - Regular and ongoing feedback
  - Collaborative and objective tool
- Frequency
  - Quarterly

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SECTIONS I - V

- Authority – legal guidance for the policy
- Reason – purpose of the policy
- Applicability – details which entities this policy applies to
- Definitions and Acronyms – provides definitions for commonly used words and acronyms referenced in the policy
- Contents – identifying what is in the document

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SECTIONS VI - IX

- Procedures – provides a description for how each of the six areas of the report card is measured and scored
- Key Contacts – points of contact for the policy
- Related Documents, Forms and Tools – a reference list of all documents, forms and tools referenced in the policy

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PROVIDER REPORT CARDS

REPORT CARD SECTIONS

- Sections and elements
  - RSR Completeness/Client Level Data
  - Programmatic Progress
  - Fiscal Progress
  - Quality Management
  - Site Visit Findings
  - Corrective Action Plan
- Roll out
  - 1st Quarter report – July 2022

Report Card Schedule (tentative)

PART A

Quarter	Send to Provider
One (Mar – May)	July
Two (June – Aug)	Oct
Three (Sept – Nov)	Jan
Four (Dec – Feb)	Apr

PART B

Quarter	Send to Provider
One (Apr – Jun)	Aug
Two (July – Sept)	Nov
Three (Oct – Dec)	Feb
Four (Jan – Mar)	May

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RSR COMPLETENESS/CLIENT LEVEL DATA

- RSR Completeness will help sub-recipients focus on completing their missing data for their final RSR submission each year.
- For Final Submission, HAHSTA's expectation is sub-recipients shouldn't have missing data elements higher than 3%. Lastly, in this section, RSR completeness data will be presented as percentage complete vs. percentage missing using chart visualization.

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PROGRAM PROGRESS REVIEW

- Will provide sub-recipients with a snapshot of the number of unduplicated customers served compared to their targeted customer goals, as planned in the scopes of work by service categories.
- Will provide sub-recipients with an additional resource to track their performances in quarterly increments and offer recommendations for technical assistance.
- If a sub-recipient has an active corrective action plan (CAP) during the time of the quarterly review, the report card will provide a status update.

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FISCAL PROGRESS REVIEW

- The fiscal component of the report card will include an analysis of the spending rate that will help determine the cash flow of the funds awarded and the timing of expenditures as they relate to the performance period of the award.

- The grants management specialist will calculate and use the burn rate as an indicator to determine if the sub-recipient is on track, overspending, or underspending the funds approved in the award.

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PROGRAM AND FISCAL PROGRESS REVIEW

Sub-Recipient Roles and Responsibilities:

- Sub-recipient is responsible for reviewing the report card and providing a written response to their assigned program officer within 10 business days of email notification.

- The response must address all programmatic and/or fiscal review findings that are above or below their expected targets for the quarter.

- The response must address each RSR completeness factor that does not meet the threshold.

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QUALITY MANAGEMENT REVIEW

- **Quality Management Plan (QMP):** A QMP documents programmatic structure and annual quality team goals.

- **Organizational Assessment (OA):** The purpose of this tool is to assess the sub-recipient's current capacity to conduct quality improvement activities that align with the best practices as stated in the recently revised Policy Clarification Notice (PCN #15-02).

- **Performance Measurement (PM):** Sub-recipient performance measures are to be reviewed and documented at least quarterly during their quarterly Quality Committee meetings.

- **Quality Improvement Project (QIP):** In accordance with the PCN #15-02 and FAQ's, each organization should engage in clinical quality improvement projects and identify its own process for determining priority quality improvement areas.

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QUALITY MANAGEMENT REVIEW

- **Technical Assistance (TA) Needs:** Sub-recipients may request specific technical assistance from their respective quality coaches or at RW.Quality@dc.gov.
- The respective CQI coach will review and provide feedback on this deliverable.
    - If the coach determines the deliverable is acceptable, it will be marked as acceptable.
    - If the coach determines the deliverable is unacceptable, the sub-recipient will be asked to do it over, factor in the feedback, and resubmit for approval
    - If deliverables are not submitted, respective coach will email subrecipients about it being overdue and copy respective PO and CQI team lead.

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SITE VISIT REVIEW

- The Site Visit portion of the report card will provide sub-recipients with a resource to track their performances during, annual site visits, give recommendations for technical assistance and provide a summary of the objective monitoring activities that have occurred during the quarter of review.
- This summary will include all findings and recommendations as applicable. This section will highlight any noted best practices.
- Additionally, this section will serve as a reminder for the sub-recipient to address any noted areas of needed improvement.

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CORRECTIVE ACTION PLAN (CAP) REVIEW

- The corrective action plan (CAP) section of the report card will highlight the status of any pending or ongoing CAP and steps to resolve the CAP.
- The PO and GMS will monitor the CAP and once the activities are complete the PO will send a letter closing out the CAP.
- *The CAP section is not scored. If applicable, a deduction of 5 points will be assessed if the CAP is not being implemented.*

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CORRECTIVE ACTION PLAN (CAP) REVIEW

- **Sub-Recipient Roles and Responsibilities:**
- The sub-recipients will submit a CAP for review and approval by the Program Officer and Grants Management Specialist, if applicable.
- Once approved the sub-recipients must implement the activities noted in the approved plan to correct noted deficiencies.

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SCORING

- Report cards will be scored based on the following five sections: RSR Compliance Review, Program Progress Review, Fiscal Progress Review and Quality Management Review
- *Note the maximum point value is 100 points.
- *The CAP section is not scored. If applicable, a deduction of 5 points will be assessed if the CAP is not being implemented.*

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SCORING

- *When scoring sections of the report card, Program Officers and Grants Management Specialists will hold sub-recipients harmless for any deficiency in an element that is determined to be the result of a situation beyond the provider's control. Situations that are held harmless are at the discretion of the PO and GMS. Examples include but are not limited to: federal emergency (COVID-19); returned site visit reports outside 45-day window; HAHSTA staff detail/absence, etc.*

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REPORT CARD TEMPLATE

- With RSR Completeness/Client Level Data

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Washington, DC EMA Ryan White Part A
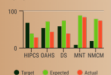
**Provider Report Card**
Quarter One (3/1/2020 – 05/31/2020)

Provider Score: A

Purpose for the Report

The purpose of the report card is to provide sub-recipients with data-driven feedback on their Ryan White programmatic, fiscal and quality management performance. The goal of the report card is to optimize the quality and efficiency of the Ryan White services provided. The expectation is that programs will utilize the feedback to make modifications as needed to achieve compliance with funding expectations. Sub-recipients are expected to provide a written response within 30 days of receipt of the report card. HAHSTA, Ryan White staff will utilize the report cards as a tool to monitor performance and provide objective data for future funding decisions.

THE BREAKDOWN

Programmatic Progress Review

Fiscal Progress Review

RSR Completeness

FEEDBACK

Programmatic & Fiscal

Program review comment/feedback starts
your target looks off compared to your plan. Specially

RSR Completeness

Insert RSR Completeness comment here
housing seems very low also poverty level has a big missing data values. These will create an issue during your RSR

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Quality Management Review

Measurement Areas	Yes	NO	
Quality Management Plan Submission w/in 30 days		No	Insert QI comments here quality improvement activities are required under your contracts and all deliverables are due by QI activity calendar
Organizational Assessment Submission (2nd & 4th QTR)	Yes		
Performance Measure (status update)	Yes		
Technical Assistance Needs		No	

Corrective Action Plan (CAP) Review

	Yes	No
Is there an approved CAP?		NO
If Yes, Is the implementation in progress?		
Is the CAP completed?		

CAP Comments

Insert CAP comments here
N/A

Findings/Recommendations/Best Practices

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Comments goes here

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NEXT STEPS

- First - 1st quarter Part A Report Cards sent to sub-recipients – July 2022

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QUESTIONS?

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For more information on the District's COVID-19 response, visit **coronavirus.dc.gov**