DC | HEALTH
GOVERNMENT OF THE DISTRICT OF COLUMBIA

QUALITY MANAGEMENT PLAN (QMP) TEMPLATE

<u>Submission Instructions:</u> Due 30 days after the start of Grant Year. Email this document to your assigned Quality Coach and cc' RW.Quality@dc.gov and your assigned Program Officer.

<u>INSTRUCTIONS PAGE</u>

Please read carefully and <u>do not submit this page</u> with your plan.

This template is formatted to assist in completing and organizing your Quality Management Plan (QMP). Reference Policy Clarification Notice 15-02 (PCN 15-02) when completing your QMP. If your agency receives both Part A and Part B funding, be sure to address both funding streams in your QMP.

<u>Template Instructions/Information:</u>

- Quality Management Plan Focus: Your QMP should include Ryan White funding specific information.
- QMP length: The body of this plan does not need to be lengthy, if it completely addresses the necessary information. Prioritize creating a QMP that spans only one (1) Grant Year (not multiple years).
- Read and follow the instructions highlighted in gray under each of the six section headings to help you understand what information is required in each section.
- The first page is your **Cover Page**. Feel free to use your organization's logo and font.

- <u>After the Cover Page, you will see **six (6) section headings**</u>:
  - o Do not change the order of the sections.
  - o Address each section under its appropriate section heading, following the instructions highlighted in gray.
  - o If additional information/documentation is needed, please include it in the Annexes section.

- <u>Signatory/Approval Page (Section 6)</u>:
  - o All parties responsible for reviewing and approving the Quality Management Plan must sign and date the signature page.

- <u>Annexes</u>:
  - o The **Performance Measure Portfolio template** has been included as **Annex A**.
  - o An example of a **Work Plan table template** including all the information we look for has been included as **Annex B**.
  - o Add any supporting documents as appropriate (i.e., organizational chart).

The **"Clinical Quality Management Plan Review Checklist"** developed by the Health Resources & Services Administration (HRSA) is provided upon request for additional guidance in completing your QMP.

Insert Agency/Organization Name

Insert Timeframe, for example: GY3r (March 2024 – March 2025)

Insert Last Revised/updated date, for example: Revised March 1, 2024

Section 1: Quality Statement

- Include a quality-related mission statement that is brief, visionary, and related to the Ryan White Services that your organization provides.
  - o Use prompt below to ensure your quality-related mission statement demonstrates: Describe the goal of your program's quality efforts and the purpose of the QM program (A QM Program is the coordination of activities aimed at improving patient care, health outcomes, and patient satisfaction).

Section 2: Annual Quality Goals

- Create a total of five or fewer quality goals for the current Grant Year. Goals should outline the year's priorities for the following components (per PCN 15-02):
  - o Infrastructure
  - o Performance measurement
  - o Quality improvement
- Aim to have at least one goal per component.

Section 3: Quality Infrastructure

Quality Management Program definition: A QM Program is the coordination of activities aimed at improving patient care, health outcomes, and patient satisfaction.

- Describe how leadership guides, endorses, and champions the QM program.
- Describe who serves on the QM committee, who chairs and facilities the meetings, how often the QM committee meets, and the purpose of the QM committee.
- Describe the staff positions responsible for developing and implementing the QM program (this may include people who do not serve on the QM committee) and related activities including the role of contractors funded to assist with the QM program.
- Describe who writes, reviews, updates, and approves the QM plan.
- Describe how Ryan White customers are involved in development and implementation of the QM program.
- Describe how stakeholders (e.g., other subrecipients in the region, planning body/committee, etc.) provide input in QM activities.
- Describe how the effectiveness of the QM program is evaluated.

Section 4: Performance Measurement

- Fill out the Performance Measure Portfolio (**Annex A**) in its entirety.

Section 5: Quality Improvement

- Describe the Quality Improvement (QI) approach(es) and/or methodologies you plan to use (e.g., Model for Improvement/PDSA, Lean, etc.).
- Describe how QI priorities or projects are selected. If known, state the QI priorities or projects for the current evaluation period.
- Describe how QI projects are documented.

Section 6: Quality Management Plan Approval/Signatory Page

- All parties responsible for reviewing and approving the Quality Management Plan must sign and date the signature page.
- Ensure that at least one signature is a person in leadership who has reviewed/approved the plan.

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ANNEX A: Performance Measure Portfolio

Funded service category *(list of all RWHAP funded service categories)*	Client services utilization data *(expressed as a percentage)*	Performance measure(s) *(list the measures selected for each service category)*	Numerator *(list how each measure's numerator is defined)*	Denominator *(list how each measure's denominator is defined)*	Baseline Data *(data point at end of previous grant year/start of current grant year)*	Data source(s) *(What is the primary source for data? What data management system stores the data? How does the recipient access needed data?)*	Frequency of data collection *(How often is data collected? What are the measurement periods?)*	Method of data collection *(How is subrecipient provided data received? Does the recipient aggregates data? How are data reports managed?)*	Method to analyze data *(How is data integrity validated? Who is responsible for data analysis? Is the data stratified? How?)*	Method for sharing data *(How is data shared? When? With whom?)*

ANNEX B: Work Plan (Example)

Goal 1: Infrastructure – Establish a comprehensive and functional quality infrastructure				
Objectives	**Key Actions**	**Timeline**	**Person(s)/Area(s) Responsible**	**Outcomes/Impact**
Revise Quality Management Plan and develop a CQM work plan. ***Progress Measure:*** *Approved QM Plan by May 2022*	Receive QM TA w/HAB consultant	January-June 2022	Leadership, QM Team, and HAB Consultant	***In progress:*** see QM Team meeting minutes (MM): January-March
	Establish annual quality goals and objectives	February 2022	Leadership and QM Manager	***COMPLETED:*** see QM Team MM – January and February
	Share and further develop narrative sections w/CQM committee	April 2022	QM Manager and QM committee members	***Inactive:*** Kickoff meeting scheduled for April 12th
Establish a QM committee ***Progress Measure:*** *QM Committee has regularly scheduled meetings to develop the QM program and corresponding activities.*	Determine QM committee's purpose, members, and members' roles and responsibilities	February 2022	Leadership and QM Team	***COMPLETED:*** see saved email correspondences b/w Program Director and QM Manager (January 25th, February 11th and 25th).
	Establish logistical details (e.g. meeting frequency)	March 2022	QM Manager and QM committee members	***Incomplete:*** ran out of time during March QM committee meeting; will add to April's meeting agenda
	Host QM committee Kick-off meeting	April 2022	QM committee members	***Pending:*** scheduled for April 12th
Goal 2: Performance Measurement – Strengthen data management, data integrity, and data utilization				
Objectives	**Key Actions**	**Timeline**	**Person(s)/Area(s) Responsible**	**Outcomes/Comments**
Identify performance measures for all applicable RWHAP-funded service categories ***Progress Measure:***	Use client service utilization (CSU) data to determine minimum # of measures for each service category	March 2022	Data Manager and QM Manager	***COMPLETED:*** see QM committee MM - February and March 2022

No less than the minimum # of appropriately associated performance measures are identified for each RWHAP-funded service category	Establish a performance measurement portfolio	April 2022	Data Manager and QM Manager	***Not yet started.*** Will address w/HAB QM consultant.
Use measurement data to determine quality improvement focus	Ensure data is stratified	June 2022	Data Manager and QM Manager	***Not yet started.*** Focus on subpopulations with significant needs.
Progress Measure: Quality improvement activities derived and planned	Analyze data to identify areas of focus needing improvement	June 2022	CQM Manager, CQM Committee, and Data Analyst	***Not yet started.***

Goal 3: Quality Improvement (QI) – Implement QI activities				
Objectives	**Key Actions**	**Timeline**	**Person(s)/Area(s) Responsible**	**Outcomes/Comments**
Ensure subrecipients have the capacity to contribute/lead QI activities *Progress Measures: # and levels of QI based trainings offered* *# of subrecipients participated in QI based training* *# of subrecipients capable of leading QI activities after completing training(s)*	Assess subrecipient QI knowledge and training needs via completion of organizational assessment tool	February 2022	QM Manager and each subrecipient CQM Lead	***COMPLETED:*** Results of organizational assessment tool reveals need for varying levels of QI based training (mostly basic and intermediate).
	Identify training topics and facilitators to lead QI based training	April 2022	Leadership, QM Manager, and QM Committee	***Not yet started.*** Focus will be on PDSA methodology and documentation of QI activities
	Complete one basic and one intermediate level web-based QI trainings	Basic: May 2022 and Intermediate: July 2022	Subrecipients, QM Manager, and QM Team (recipient)	***Not yet started.*** Identify relevant QI trainings available
	Identify subrecipients with the capacity to participate in CQII's Beginners QI Learning Lab	August 2022	CQII Team, CQM Manager, select subrecipients, and HAB PO.	***Not yet started.*** Discuss benefits and time/workload commitment to determine burden on subrecipients.