



LVTGA

RYAN WHITE PART A  
CQI MEETING

**January 11, 2021**

**Jessica Rios**

# CQI Then & Now

**June 2021**

SWOT Analysis

SWOT Analysis

**January 2022**

# QI NEWS YOU CAN USE

Las Vegas TGA Newsletter

The Las Vegas TGA is making great strides in Clinical Quality Management (CQM). Our Clinical Quality Improvement (CQI) Advisory Committee continues to meet quarterly to focus on data, consumers, and the improvement of patient care, health outcomes, and patient satisfaction. Since Quality Improvement is continuous, systematic, iterative, and at the heart of what we do, this newsletter intends to share tools and resources to build capacity. Together we are spearheading systemic change that is making an impact in our jurisdiction. Below you will find a list of resources and links that will help guide our work.

Video Resource	Purpose
CAREWare 6 Logging In <a href="https://youtu.be/VuWsl-sjWdQ">https://youtu.be/VuWsl-sjWdQ</a>	This video goes over CAREWare access information including how to download WinAuth on a mobile device. This is ideal for a new user that wants to become familiar with the database.
Client Demographics & Services <a href="https://youtu.be/ceImoAloqIV">https://youtu.be/ceImoAloqIV</a>	This video will go over a client's demographic data in CAREWare. Providers will understand how to navigate the system and will learn how to view, add, and enter a service.
LVTGA Ryan White Services Report (RSR) <a href="https://youtu.be/Hv9R0j1d6eY">https://youtu.be/Hv9R0j1d6eY</a>	This tutorial will go over how to clean missing demographic information and the steps to pull a RSR in the CAREWare database. It will also go over how to download and view a RSR file.
RFR & All Services Report Basics <a href="https://youtu.be/2D1L7pit82U">https://youtu.be/2D1L7pit82U</a>	This video is specifically directed to the lead fiscal and lead CAREWare designee from each agency. This will go over how the RFR, and the All Services Report work together to maximize the turnaround time for receipt of payment.
How to Add a Client to Domain <a href="https://youtu.be/9v-ZrDeA_G8">https://youtu.be/9v-ZrDeA_G8</a>	This tutorial will help providers add clients to the CAREWare database. It covers provider access, URN, information, as well as information on how to avoid duplicating a client.
CQM Community Engagement <a href="https://youtu.be/rf9oF1RV08">https://youtu.be/rf9oF1RV08</a>	This video provides information about our quarterly Clinical Quality Improvement Committee Meeting. The purpose of this video is to inform consumers, providers, and the community about our Las Vegas Transitional Grant Area CQM / CQI program.

CAREWare 6 Performance Measurement Module <a href="https://youtu.be/GXaTOGH4Ka0">https://youtu.be/GXaTOGH4Ka0</a>	The aim of this video is to provide access and guidance to the performance measurement module in CAREWare to support subrecipients as they monitor their data to achieve strategic goals. You will also learn how to pull a client list that pertains to the performance measures you are monitoring.
The Tennis Ball Video <a href="https://youtu.be/JHCH905IT60">https://youtu.be/JHCH905IT60</a>	This video illustrates an interactive exercise to teach quality improvement in HIV care. This video provides PDSA Cycle information and tests of change.

## Alphabet Soup Lingo

The Las Vegas TGA Clinical Quality Improvement meetings contain several acronyms that attendees may not be familiar with. The information below will help you gain an understanding about the lingo you will encounter at our meetings. By becoming familiar with these key words, you will gain a renewed sense of confidence when note taking and participating in future conversations. A glossary of Ryan White HIV/AIDS Program-Related Terms can be found [here](#).



## Commonly Used Acronyms In CQM

<b>ADAP</b> – AIDS Drug Assistance Program	<b>HRSA</b> – Health Resources and Services Administration
<b>CQM</b> – clinical quality management	<b>PDSA</b> – plan do study act
<b>CQII</b> – Center for Quality Improvement and Innovation	<b>PM</b> – performance measure
<b>EHE</b> – Ending the HIV Epidemic: A Plan for America	<b>RWHAP</b> – Ryan White HIV/AIDS Program
<b>HAB</b> – HRSA HIV/AIDS Bureau	<b>TA</b> – technical assistance
<b>HHS</b> – (Department) of Health and Human Services	<b>QI</b> – quality improvement
	<b>VL</b> – viral load
	<b>WP</b> – work plan



## Annual Quality Management Plan Calendar Year 2021



## Annual Quality Management Plan Calendar Year 2022



# Strengths

- Our TGA is at 91.60% on viral suppression data (above State 88.8% & National average of 88.1%)
- 2021 Annual Quality Management Plan is completed & approved
- 2022 Annual Quality Management Draft is ready
- Quarterly QI News You Can Use Newsletters were created & distributed
- Video tutorials & resources were created and shared for training and capacity building purposes



Performance Measurement Module



The Tennis Ball Game CQI Activity



CQM Committee Engagement

### PLAN DO STUDY ACT (PDSA) FORM

Directions: Use this Plan-Do-Study-Act (PDSA) tool to plan and document your progress with tests of change conducted as part of your quality improvement project(s). This tool should be completed by the Las Vegas TGA designated Single Point of Contact (SPOC) with review and input of the project team. Answer the questions below and plan, conduct, and document your PDSA cycles. Keep in mind that quality improvement usually involves multiple PDSA cycles in order to achieve your aim. Use as many forms as you need to track your PDSA cycles. Please refer to the Specific, Measurable, Achievable, Relevant and Time Specific (SMART) Goals from page 11 of the Las Vegas TGA Annual Quality Management Plan Calendar Year 2021.

Agency: \_\_\_\_\_  
 SPOC: \_\_\_\_\_  
 Baseline Data: \_\_\_\_\_  
 Quarter: \_\_\_\_\_  
 Data Reporting: \_\_\_\_\_



#### PLAN

Test/Implementation Plan (THINK ABOUT WHAT CHANGES YOU CAN MAKE THAT WILL RESULT IN IMPROVEMENT): List your action steps, person(s) responsible, and timeline.

What do you predict will happen and why? Who will be responsible for this PDSA? What resources will be needed? Plan a small test of change. How long will it take to implement?

Data Collection Plan (THINK ABOUT HOW YOU WILL KNOW THE CHANGE IS AN IMPROVEMENT): What data/measures will be collected? Who will collect the data?

1	As of Date	DVS-MCM	1IC-MCM	2UD-MCM	DVS-EIS	DVS-OAHS
2	12/31/2019	82.36%	93.59%	66.35%	72.52%	74.63%
3		DVS-MCM	1IC-MCM	2UD-MCM	DVS-EIS	WVS-OAHS
4	12/31/2020	85.64%	94.24%	74%	82%	83.95%
5		Q1: DVS-MCM	Q1: 1IC-MCM	Q1: 2UD-MCM	Q1: DVS-EIS	Q1: DVS-OAHS
6	3/31/2021	85.97%	93.92%	75.34%	83.74%	84.52%
7		Q2: DVS-MCM	Q2: 1IC-MCM	Q2: 2UD-MCM	Q2: DVS-EIS	Q2: DVS-OAHS
8	6/30/2021	88.69%	84.35%	69.57%	70.67%	78.44%
9		Q3: DVS-MCM	Q3: 1IC-MCM	Q3: 2UD-MCM	Q3: DVS-EIS	Q3: DVS-OAHS
10	11/30/2021					
11		Q4: DVS-MCM	Q4: 1IC-MCM	Q4: 2UD-MCM	Q4: DVS-EIS	Q4: DVS-OAHS
12						
13						
14						
15						
16	2019					
17	2020					
18	2021					

When will the collection of data take place?  
 \_\_\_\_\_

How will the data (measures or observations) be collected and displayed?  
 \_\_\_\_\_

What decisions will be made based on data?  
 \_\_\_\_\_

**DO**

Activities/Observations: Record activities/observations that were done in addition to those listed in plan (above):  
 \_\_\_\_\_

**STUDY**

Questions: Copy and paste Prediction from Plan above and evaluate learning. Complete analysis of the data. Insert graphic analysis whenever possible. Prediction: Learning (Comparison of questions, predictions, and analysis of data):  
 \_\_\_\_\_

Summary (Look at your data. Did the change lead to improvement? Why or why not?):  
 \_\_\_\_\_

**ACT**

Describe next PDSA Cycle: Based on the learning in "Study," what is your next test?  
 \_\_\_\_\_

LV TGA PDSA Form  
 Page 2  
 Revised: 10/19/2021

### Timeline for Reporting

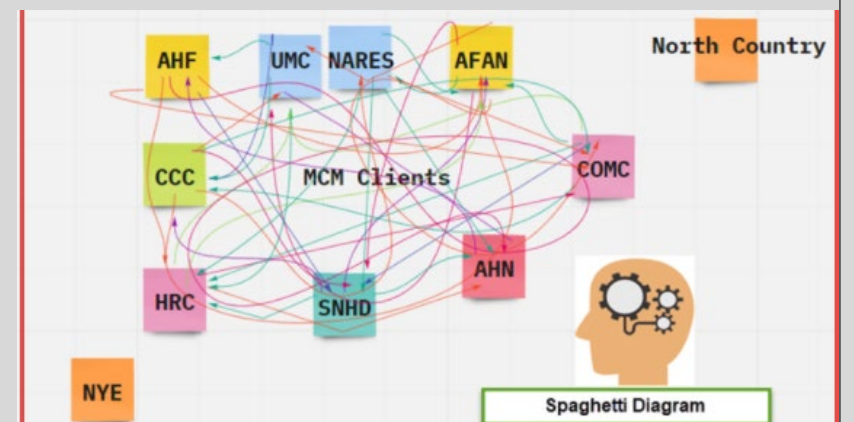
Performance Measure As of Date:	Data Days	Data Reporting
June 30, 2021	September 30, 2021	October 29, 2021
November 30, 2021	December 31, 2021	January 10, 2022

# Strengths

- Onsite and online technical assistance & training was provided to RWPA SPOCS
- The LVTGA CQI team continues to learn, grow, and collaborate
- We have a data collection and communication plan in place that pertains to reporting
- We are all using the same Plan, Do, Study, Act Methodology & reporting tools
- Our CQI team is flexible and transparent

# Weaknesses

- Patient barriers to care still exist
- MCM needs attention
- Communication with clients
- Client follow-up
- Inner agency referrals
- Staff turnover
- New staff training, policies & procedures
- Process maps to illustrate workflow





# Opportunities

- Meet & greets
- Interagency collaboration
- CQII Training
- Collaboration with community partners
- SPOCs involve their team when completing PDSA forms

# Threats

- Inaccurate reporting
- Funding
- Working in silos





# ANNUAL QUALITY WORK PLAN 2022



CY2021

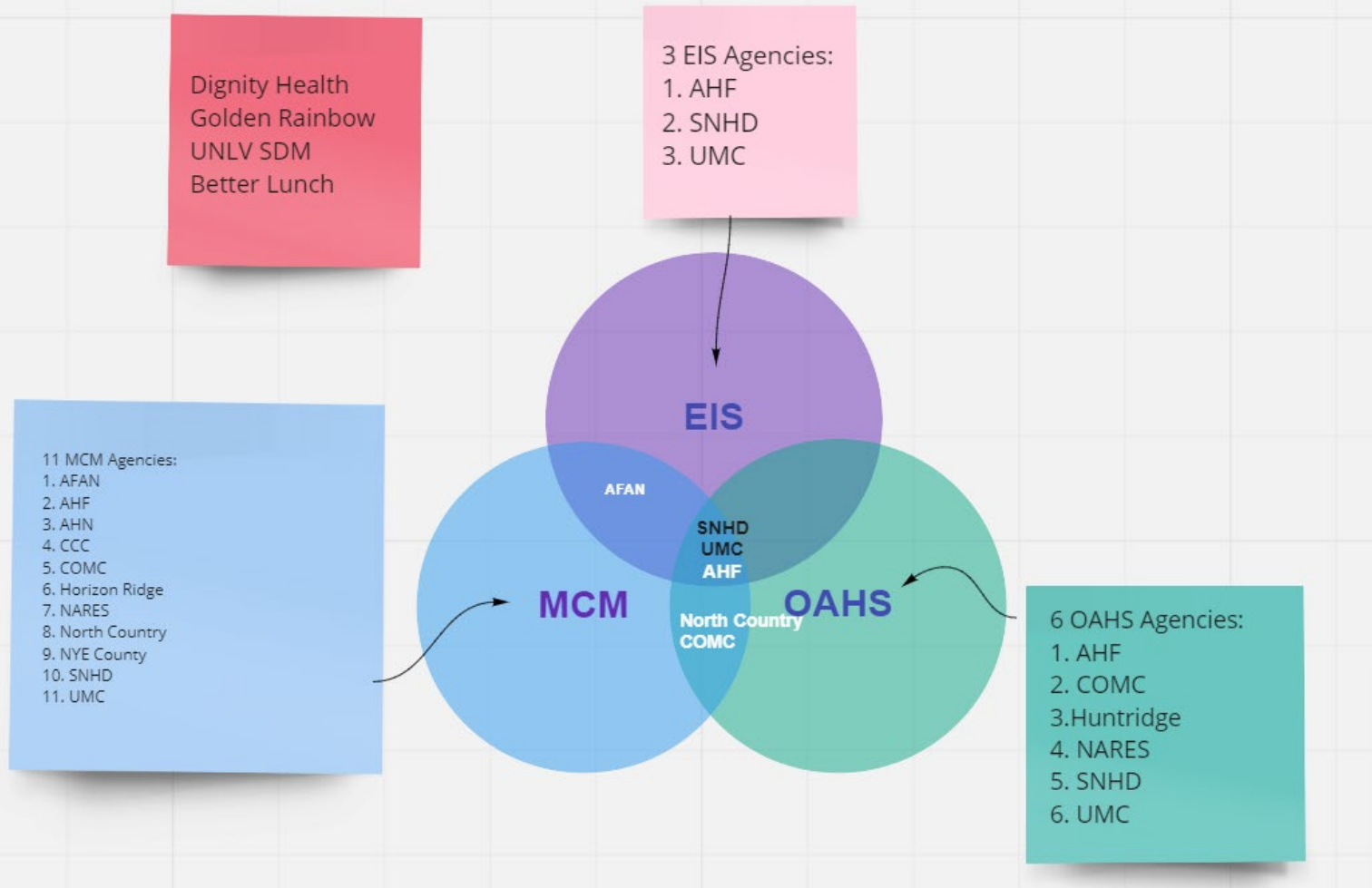
Total Ryan White Clients Served 5,025

Service Categories	Unduplicated Clients	Percent	Performance Measure
<b>Early Intervention Services</b>	<b>859</b>	<b>17.09%</b>	<b>1</b>
Emergency Financial Assistance	83	1.65%	0
Food Bank/ Home Delivered Meals	145	2.89%	0
Health Education/ Risk Reduction	295	5.87%	0
Health Insurance Premium & Cost Sharing Assistance	30	0.60%	0
Housing	0	0.00%	0
<b>Medical Case Management (Incl. Treatment Adherence)</b>	<b>4026</b>	<b>80.12%</b>	<b>2</b>
Medical Nutrition Therapy	372	7.40%	0
Medical Transportation	285	5.67%	0
Mental Health Services	220	4.38%	0
Oral Health Care	171	3.40%	0
<b>Outpatient/ Ambulatory Health Services</b>	<b>947</b>	<b>18.85%</b>	<b>1</b>
Psychosocial Support	133	2.65%	0
Substance Abuse Outpatient Care	24	0.48%	0

# SERVICE UTILIZATION REPORT

Percent of RWHAP eligible clients receiving at least one unit of service for a RWHAP-funding service category.	Minimum number of PM
<b>&gt;=50%</b>	<b>2</b>
<b>&gt;15% to &lt;50%</b>	<b>1</b>
<b>&lt;=15%</b>	<b>0</b>

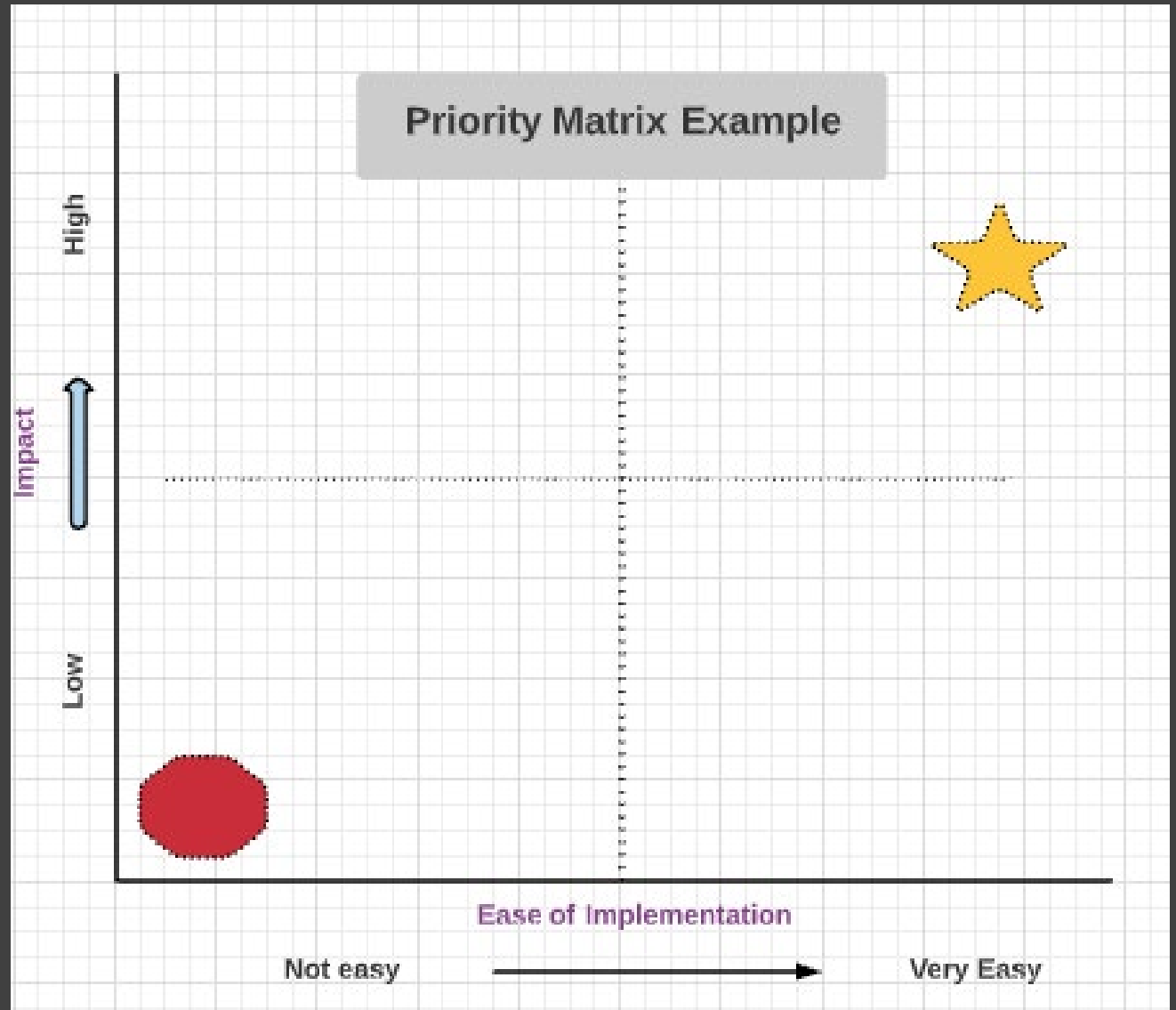
# EIS, MCM, & OAHS Agencies





# SWOT ANALYSIS FOR SERVICE UTILIZATION

# PRIORITY MATRIX ACTIVITY





# GENERAL DISCUSSION

**SPOC Key Takeaways**



# THANK YOU!

"If everyone is moving forward together, then success takes care of itself." - Henry Ford