# RYAN WHITE PART-B PROGRAM 2022-2023 HIV CLINICAL QUALITY MANAGEMENT PLAN



TEXAS Health and Human Services

Texas Department of State Health Services This Page is Left Blank Intentionally

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## **CLINICAL QUALITY MANAGEMENT PLAN ATTACHMENTS**

ATTACHMENT 1: 2022-2023 CQM WORKPLAN

ATTACHMENT 2: 2022-2023 CQM PM PORTFOLIO

## I. Program Overview

The Texas Department of State Health Services (DSHS) HIV/STD Program is a Health Resources and Services Administration (HRSA) Ryan White Part-B grant recipient. The DSHS HIV/STD Program supplements this funding with State Services (SS) funds for the provision of HIV medical and support services for eligible people with HIV that are not otherwise covered for these services by insurance or other funding sources.

The Ryan White HIV/AIDS Program Part-B and State Services (RWHAP-B/SS) effort funds 27 outpatient medical and supportive service categories and serves an average of 35,000 individual clients annually, across 254 Texas counties. The RWHAP-B/SS Clinical Quality Management (CQM) program is responsible for the oversight of clinical quality management activities to ensure alignment with current HRSA Ryan White HIV/AIDS Program (RWHAP) CQM policies and guidelines.

# II. Quality Statement

The RWHAP-B/SS CQM program's priorities are to ensure high-quality health care and supportive services are delivered to people with HIV. The program applies a dynamic structure allowing for change and updates at any time as needed. The focus is on continuous quality improvement in the following four strategic domains:

- Access
- Outcomes
- The Client/Patient Experience
- Eliminating Health Disparities in Texas

# **III.** Quality Infrastructure

The CQM program applies a strong infrastructure to facilitate continuous improvement in HIV health care and supportive services in the most costeffective manner. The DSHS HIV/STD Program provides the infrastructure for the CQM Committee, HIV data system, annual program evaluation, site visit monitoring tours, CQM capacity building for the HIV workforce, and ongoing CQM activities across the state.

#### HIV/STD Program Mission Statement

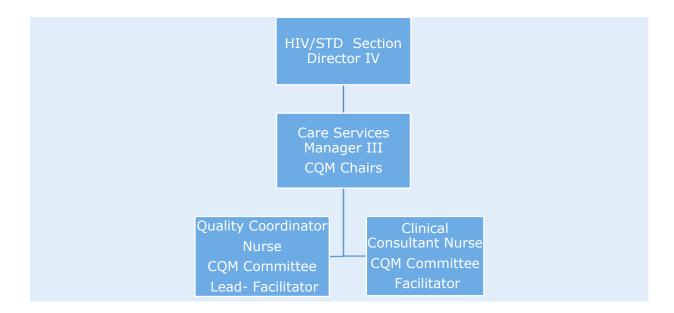
Our mission is to prevent, treat, and/or control the spread of HIV, STDs, and other communicable diseases to protect the health of the citizens of Texas. In keeping with this mission, we procure, allocate, and manage fiscal and human resources so that we may:

- Provide HIV/STD education and information
- Collect, interpret, and distribute data relating to HIV and STD
- Guide those who oversee, plan for, or provide HIV and STD services
- Provide medication and supplies to prevent, manage, and treat communicable diseases

In pursuit of this mission, we will make every effort to assure that the citizens of Texas receive quality services.

#### Leadership and Staffing Resources

Program leaders and management staff actively support, endorse, and champion the HIV CQM Program. Some examples include annual and asneeded allocation of funding for CQM activities, ongoing coaching, guidance, and support to CQM staff, assistance in project selection and management, and the HIV Care Services Manager serves as CQM Committee Chair. Texas DSHS HIV/STD Section Director II is the final approver of the CQM Plan and activities with oversight assigned to the HIV Care Services Manager III, CQM Committee Chair. See CQM Program Leadership Structure Visual Graphic I.



#### Partners & Stakeholders

The program funds six Ryan White Administrative Agencies (AAs) throughout the state. The regional AAs fund, manage and oversee HIV medical and supportive services to meet the needs of each specific region. Three of the AAs are also directly funded by HRSA with Part-A funds intended to serve metropolitan areas that are most impacted by the HIV epidemic. These include the AAs managing services in Dallas County, Tarrant County, and the city of San Antonio. The other three Part-B AAs manage services in both rural and non-rural outlying areas to ensure access points are available in all Health Service Delivery Areas (HSDAs). There are two additional Part-A AAs, serving the Houston Eligible Metropolitan Area (EMA) and Austin Transitional Grant Area (TGA) metropolitan areas respectively. While these two AAs are not funded by the RWHAP-B/SS program, we collaborate with the AAs to align policies and procedures and other Ryan White activities.

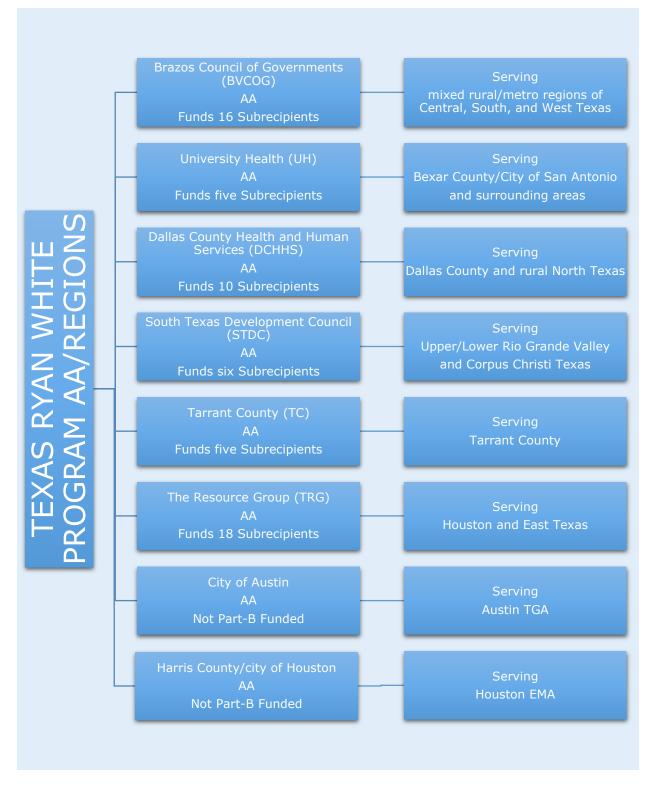
The AA's and/or their subrecipients also may be directly funded by HRSA for other Ryan White Parts and/or the Centers for Disease Control and Prevention (CDC) with Ending the HIV Epidemic (EHE) funding, and/or other funding to serve specific populations or provide specific types of services for people with HIV and/or to prevent HIV transmission. Each AA has its own CQM Plan to focus CQM initiatives and activities on region-specific needs, in addition to aligning its CQM Plan with the overarching statewide goals and initiatives. The Ryan White Part-B CQM Committee guides, reviews and approves the six regional Part-B funded AAs' CQM Plan every two years and more frequently as needed. See Program Funding Structure Visual Graphic II for a breakdown of AAs and the regions they serve on the following page.

The CQM Committee partners with many HIV stakeholders, regardless of funding source, to maximize resources and efforts in meeting shared goals of improving the health outcomes of people with HIV and preventing HIV transmission in Texas.

The CQM Committee strives to include input from people with HIV in planning and implementing quality improvement activities. Examples of how this is accomplished include facilitating incentivized Customer Consultant Role(s) on the CQM Project Team and ongoing surveys of clients receiving HIV services at the state and regional level. The Texas Medication Advisory Committee (MAC) welcomes public comment both orally and in writing at every meeting and has several members who are persons with HIV and the Texas HIV Syndicate, the statewide HIV/STD community planning group for Texas, is comprised of community decision-makers including many people with HIV. Program Funding Structure Visual Graphic II.

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#### 2022-2023 RW-B CQM PLAN



Clinical Quality Management Committee

The CQM Committee is intentionally structured to include representation from key stakeholders that can provide specific expertise or lens to the CQM

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Program. The CQM Program has a four core and 16 Ad hoc members, for a total of 20 members, as follows:

Clinical Quality Management Core Committee						
Role	Title	Representing	Key Responsibilities			
Chair	HIV Care Services Manager	DSHS Care Services	<ul> <li>Lead and champion program activities</li> <li>Participate in the evaluation process</li> <li>Liaison to executive-level leaders at Texas DSHS</li> </ul>			
Lead Facilitator	HIV Care Services Quality Coordinator Nurse	DSHS Care Services	<ul> <li>Write and update CQM Plan</li> <li>Manage CQM activities</li> <li>Develop meeting agendas</li> <li>Record meeting minutes</li> <li>Manage QI projects</li> </ul>			
Facilitator	HIV Clinical Nurse Consultant	DSHS Care Services	<ul> <li>Serve as back-up to the facilitator</li> <li>Provide clinical consultation</li> <li>Inform program of HIV clinical guideline updates</li> </ul>			
Data Manager	Statistician	DSHS Care Services	<ul> <li>Collects performance measure data for projects</li> <li>Assists with all program data requests</li> </ul>			
Adhoc Memb						
Role	Title	Representing	Key Responsibilities			
Project Customer Consultant	HIV Community Member	People with HIV	<ul> <li>Provides input on CQM activities and informs needs of the HIV community</li> </ul>			
Regional Program Consultants (Four)	HIV Care Services	DSHS Care Services	<ul> <li>Inform program of region-specific needs and or activities related to CQM</li> </ul>			
Grant Specialist	HIV Care Services	DSHS Care Services	<ul> <li>Inform program of grant-specific requirements and or activities related to CQM</li> </ul>			
Training Specialist	HIV Care Services	DSHS Care Services	<ul> <li>Assist with training and capacity building for CQM Program</li> </ul>			
THMP Specialist	THMP Managers	DSHS THMP	<ul> <li>Share information and unmet needs from the THMP</li> </ul>			
Regional AA CQM Leaders (Eight)	Varied Titles	Regional AA CQM Programs	<ul> <li>Inform program of region-specific needs and or activities related to CQM</li> </ul>			

The CQM Committee is responsible for the development and ongoing evaluation of the following:

#### 2022-2023 RW-B CQM PLAN

•	Quarterly CQM meetings				
Administration and review of patient/client satisfaction surveys					
٠	<ul> <li>Ongoing data validation and standardization across regions</li> </ul>				
٠	CQM Program evaluation process				
٠	Annual QA/QI recognition awards				
Annual review of CQM-related policies					
Annual review of CQM budget					
٠	Annual review and update of the CQM plan				
٠	Annual update of goals and workplan				
•	CQM committee membership				
•	Process for planning and coordinating CQM activities & projects				
•	CQM capacity-building activities				
Data of multiple data sources toward actionable improvement activities					
٠	Performance Measure (PM) selection per HRSA PCN 15-02				
•	Process for sharing data with stakeholders				
•	Ensuring inclusion of input from PLWH in CQM program activities				
•	Service Standards and related monitoring tools				
٠	QA monitoring process to measure compliance and to identify areas of needed				
	corrective action planning versus opportunities for improvement through QI				
	activities				
٠	QA Monitoring Deficiency Response Plan				
Recruitment and retention of regional CQM champions					
٠	Review of CQM contract language				
Weekly communication with AAs to Share: learning opportunities and other					
	announcements related to the CQM program and beyond				

Quality Assurance and Program Evaluation

The CQM Program is evaluated annually using the committee approved CQM Organization Assessment Tool in addition to the evaluation activities listed in the responsibility table above. For overall program evaluation, service standards are available for each RWHAP allowable service category and are updated annually and as needed. The Service Standards include state and federal regulations, laws, program requirements, the most current U.S. Public Health Standards (USPHS), and the Health and Human Services (HHS) HIV Clinical Care Guidelines. The Service Standards detail

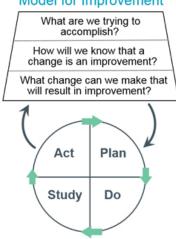
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administrative, fiscal, and clinical expectations providers of funded services are required to adhere to. Compliance with Service Standards is confirmed through ongoing monitoring of funded AAs and subrecipients.

Annual program monitoring visits are performed virtually or in person in each region to assess and assure compliance with program requirements and Service Standards. Additionally, the CQM Committee uses the data from program monitoring to identify opportunities for quality improvement projects and/or other improvement activities. The program developed and continues to follow a structured guality assurance deficiency response plan for priority services and priority indicators. This process outlines the expectations and timelines for Corrective Action Plans (CAPs).

**Continuous Quality Improvement** 

The CQM Program's focus is on continuous quality improvement. Quality improvement activities and projects are determined by analyzing multiple sources of data to identify priorities and opportunities for improvement. The CQM Program applies the Institute for Healthcare Improvement (IHI) Model for Improvement. However, depending on the project the program may apply other models for improvement such as the Lean or Six Sigma Methodology. See IHI Model for Improvement Visual Graphic III.



Model for Improvement

See URLs for more information: https://www.ahrq.gov/cahps/qualityimprovement/improvement-guide/4-approach-gi-process/sect4part2.html https://www.ihi.org/resources/Pages/HowtoImprove/default.aspx. The CQM Program has at minimum one active quality improvement project in progress. The CQM Program enables each AA to focus improvement activities for their region as they deem appropriate based on data, regional needs, demographics, identified disparities, and other HIV and related

opportunities for improvement with support, guidance, and approval from DSHS as applicable. The CQM workplan is available in Attachment 1.

## IV. Annual Goals

Clinical quality goals for 2022-2023:

- (1) To support and align goals with Texas Achieving Together to End the HIV Epidemic in Texas Plan (https://achievingtogethertx.org/) through Treatment as Prevention (TasP). Focus is on working to improve the following through capacity building and process improvement:
  - Rapid Access to HIV Medical Care and Medications
  - Retention in HIV Medical Care
  - HIV Viral Suppression



(2) To close age-related gaps in reaching and sustaining HIV viral suppression, identified in data analysis in preparation for participation in the HRSA-funded Center for Quality Improvement and Innovation's (CQII's) National Quality Improvement Collaborative' create+equity.



# v. **Performance Measurement**

The CQM Program selects HRSA HIV/AIDS Bureau (HAB) Performance Measures (PMs) by validating service utilization units of eligible RWHAP clients and applying the defined criteria of HRSA Policy Clarification Notice (PCN) 15-02, and in consideration of the emerging needs of public health as it relates to HIV.

PMs are collected and analyzed at minimum quarterly and are used to evaluate the status and effectiveness of current CQM activities in meeting the needs of the CQM Program and inform changes and updates to the CQM Work-plan as needed. The performance measure portfolio is available in Attachment 2.

Sharing Data with Stakeholders

The QM Committee shares performance data and project updates at CQM quarterly meetings. Texas DSHS also shares the HIV Statewide Care Continuum and other important related data online available at the following URLs:

```
https://achievingtogethertx.org/map-of-texas/
https://achievingtogethertx.org/hiv-in-texas/
https://achievingtogethertx.org/hiv-in-texas-overview/
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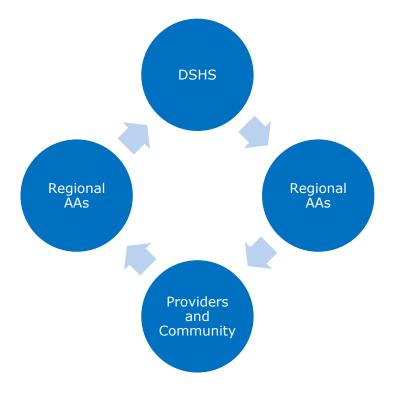
The HIV Care Services staff visit most if not all regions of Texas annually to provide in-person and/or virtual presentations of HIV population data, including stratification by age, gender, race, ethnicity, method of HIV acquisition, and other information.

## vi. Communication

Communication is a top priority of the CQM Program. The CQM Committee meets quarterly, while the CQM create+equity project team meets monthly. In efforts to improve communication with our stakeholders across Texas; the program has integrated technology using virtual meeting platforms for many CQM-related activities to include CQM Committee meetings, trainings, quality assurance corrective action plan check-ins, and other meetings.

The Care Services Group keeps the lines of communication open with its CQM champions at each of the regional AAs in various ways, including weekly email blasts sharing updates to HIV clinical guidelines, new or revised HRSA PCNs, program updates, learning opportunities, and other important announcements, along with monthly one-hour meetings with each of the six Part-B AAs with CQM being a standing agenda topic. The DSHS CQM and Care Services program staff prioritize building and nurturing relationships with our six AAs and other stakeholders, fostering open communication and collaboration across regions. DSHS CQM staff participate in regional AA CQM committee meetings, training, other activities, and vice versa.

### Communication Flow Visual Graphic IV.



Surveys and Regional Needs Assessments

Ongoing client satisfaction surveys and regional needs assessments are performed by DSHS and our six regional AAs on various topics. One example is the create+equity projects' qualitative survey conducted throughout Quarters II & III, of 2022, to assess perceived challenges to reaching and sustaining HIV viral suppression, from people with HIV. All funded subrecipients also perform ongoing region-specific surveys and assessments. The CQM Committee reviews all sources of information listed above in the annual planning of CQM activities.

# vII. Capacity Building & Resources

The CQM Committee collaborates with our internal DSHS HIV/STD trainers, subject matter experts, external contractors, and other partners, to provide and engage in multiple ongoing capacity-building activities for the HIV workforce, and other stakeholders. The DSHS HIV/STD section offers many ongoing training initiatives and programs for the HIV workforce, including the following summary of activities and resources.

The Care Services Group Trainer facilitates monthly FUNdamentals virtual training sessions featuring varying topics and subject matter experts as presenters for; and from; the HIV workforce across Texas based on emerging needs in HIV care and services, current events in healthcare, program requirements, HIV clinical updates, and other HIV and healthcare-related topics. These recurring monthly sessions are optional for stakeholders and the HIV workforce.

The CQM Committee collaborates with the Ryan White Part-F funded South-Central AIDS Education Training Centers' (SCAETC) local performing sites housed across Texas for ongoing capacity building for clinicians and other HIV workforce members. Planning is in development for statewide ongoing quarterly HIV Basics and other recurring training and capacity-building activities for new and seasoned HIV workforce staff. Information about the SCAETC and current education and training opportunities are available at URL: https://hsc.unm.edu/scaetc/education-training/

The CQM program staff participates and recommends to the Texas HIV workforce the HRSA-sponsored Center for Quality Improvement and Innovation (CQII) learning labs, quality improvement collaboratives, and many other CQM resources available at URL: Homepage | TargetHIV. The Texas CQM Program offers eight CQM leadership training presentations with video recordings and multiple Ryan White CQM tools and resources on our website see URLs below: https://www.dshs.texas.gov/hivstd/qm/ https://www.dshs.texas.gov/hivstd/qm/tools.shtm https://www.dshs.texas.gov/hivstd/qm/websites.shtm

DSHS HIV/STD Prevention and Care training resources are posted on the DSHS HIV/STD Workforce Training Center webpage at the URL: https://www.dshs.state.tx.us/hivstd/training/

Role	Name	Email Addresses
CQM Committee Chair	Janina Vazquez	Janina.Vazquez@dshs.texas.gov
CQM Lead Facilitator	Julie Saber	Julie.Saber@dshs.texas.gov
CQM Facilitator	Emily Linnemeier	Emily.Linnemeier@dshs.texas.gov
CQM Data Manager	Terri Moore	Terri.Moore@dshs.texas.gov

#### Contact Information

## VIII. CQM Plan Approval

Please note that the DSHS HIV/STD Prevention and Care Unit Director position is currently vacant; therefore, the 2022-2023 CQM Plan approvers are Joshua Hutchinson, Interim TB/HIV/STD Section Director and RWHAP Part B Project Director; and Janina Vazquez, HIV Care Services Group Manager and CQM Committee Chair.

Joshua Hutchison

Janína Vazquez

Joshua Hutchison Interim Director, TB/HIV/STD Section RWHAP Part B Project Director

Janina Vazquez Manager, HIV Care Services Group CQM Committee Chair

