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Quality Management Overview

Central Florida HIV Planning Council
May 15th 2025

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Agenda

Agenda
PCN 15-02
Quality Management: Assurance & Improvement
Performance Measures
Butterfly Effect Game ~or~ Standard A

Objectives

- **Understand why Quality Management is integrated into all RW Programs**
- **Be able to identify the difference between Quality Assurance and Quality Improvement**
- **Understand the anatomy of a Performance Measure**
- **Process & Systems kinetic activity**

PCN 15-02 Review

Policy Clarification Notice (PCN) 15-02

- A <u>Policy Notice</u> is developed to help grant recipients understand and carry out Ryan White legislation

- PCN 15-02 clarifies the components of a Clinical Quality Management (CQM) program:
    - Multi-disciplinary Teams
    - Quality Improvement (QI) Projects
    - Quality Management Plan
    - Performance Measures

What CQM is vs. What CQM is not

- CQM is not:
  - × Grant administration
  - × Quality assurance
  - × Monitoring & evaluation
  - × Data reporting & integration

- CQM is:
  - ✓ Building infrastructure (workgroups, schedules, documentation, etc.)
  - ✓ Performance measurement for QI purposes
  - ✓ QI projects

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Assurance vs. Improvement

Quality Assurance

VS

Quality Improvement

The main objective for Quality Assurance (QA) is to measure a system's compliance with established standards and is the responsibility of specific and designated staff. This is a required and reactive component focusing on identifying the outliers or 'bad apples' in a given sample.

The main objective for Quality Improvement (QI) is to continually improve a process to improve healthcare outcomes and is the responsibility of all staff members. This is a chosen and proactive approach which focuses on processes and systems which impact a client's healthcare outcomes.

What is one example of Quality Assurance and one example of Quality Improvement?

Required Elements

Infrastructure

Performance Measurement

Quality Improvement

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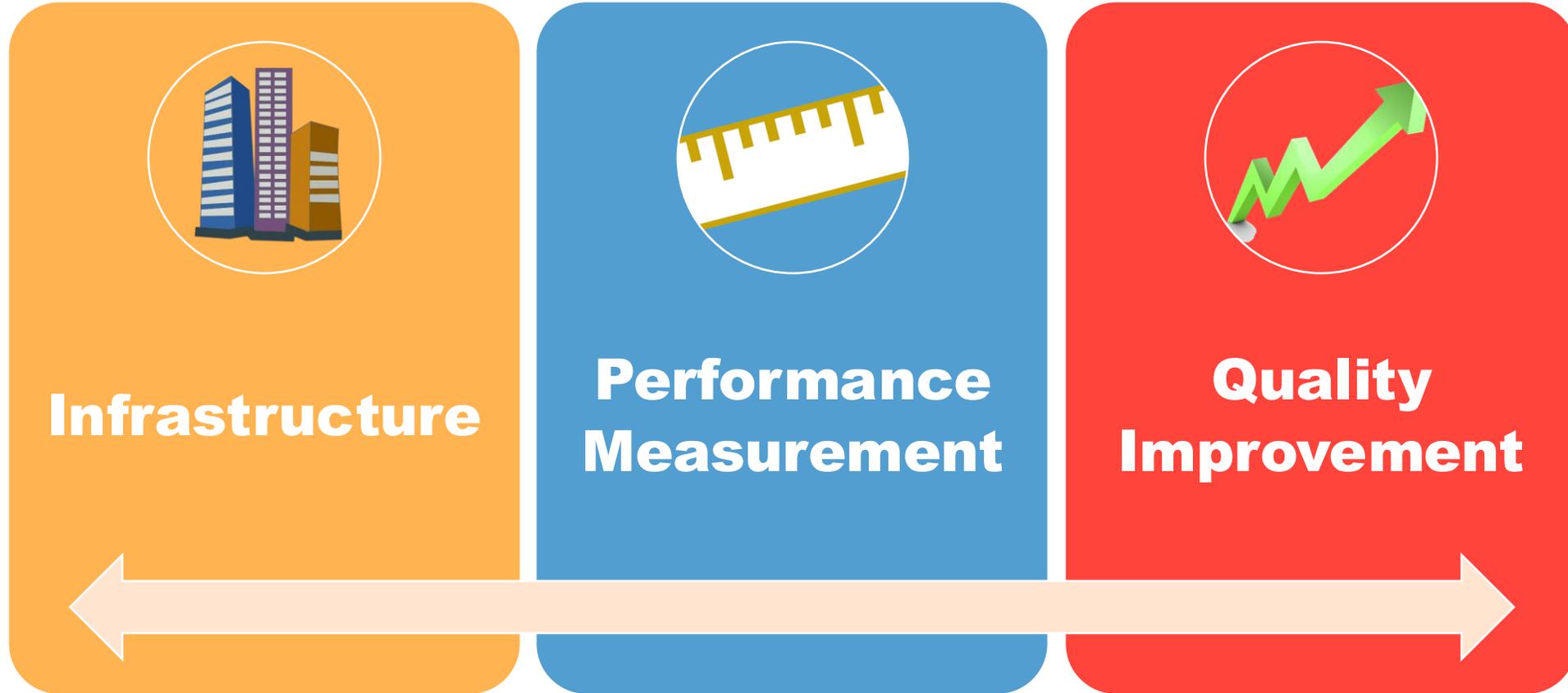
What is a Measure?

- A tool used to measure specific aspects of care & services that are linked to better health outcomes

- Tells us the *outcome* of what is being measured and which *type* of clients are being measured

- Data comes from client's profile in CAREWare or Provide

Types of Measures

Process measures: what a provider is doing or how they are doing it

- Screenings, immunizations, wait times

Outcome measures: the impact of a provider service or intervention

- Viral load suppression, retention in care

What Makes a Reliable Measure?

- Accuracy
- Improvability
- Relevance
- Measurability

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Performance Measurement
The Anatomy of a Measure

	Numerator	Clients from the denominator who meet the performance measurement criteria
	Denominator	The denominator is comprised of all the clients for a given measure within a specific timeframe. This will change depending on the measure

Say we wanted to find out the percentage of people wearing glasses in the room.
- What would be the denominator?
- What would be the numerator?
- How do we find the percentage of glasses wearers?

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The Anatomy of a Measure

Let's examine our area's viral load suppression rate in 2024

Numerator
All clients from the denominator with a viral load of less than 200 copies

$$\frac{914}{1110}$$

Denominator
All clients who are HIV positive with at least one medical visit in the past 12 months

When we divide 914 from 1110 and multiply by 100 we get a percentage of 82.34% it is best practice to display the whole number or the first decimal place, which measures the area 7 VLS rate at **82%** at the end of 2024

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Ways to Analyze a Measure

2022 Agency Viral Load Suppression
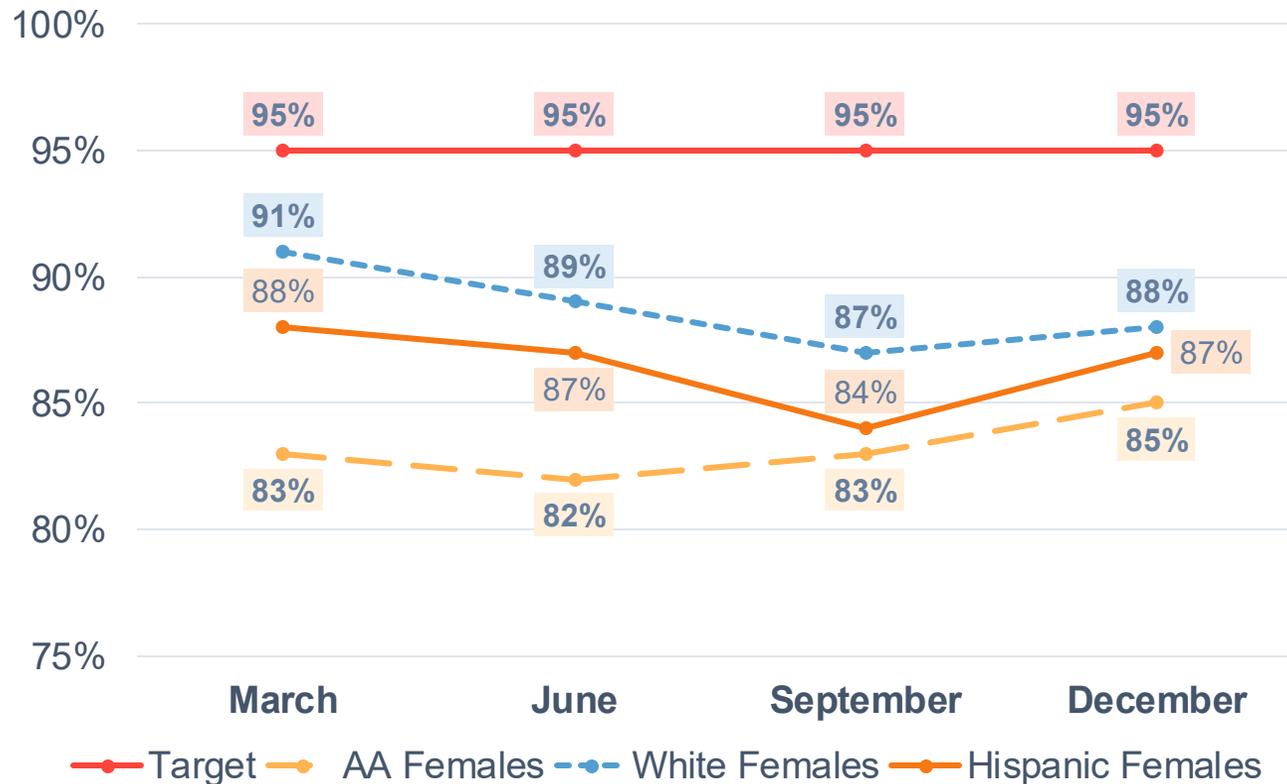
Percentage outcome: tells us the percentage of clients that have reached the desired outcome. We can then compare to:

- The target
- Other time periods
- Other groups of clients

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Ways to Analyze a Measure

2023 – Quarter 1
Part B Viral Load Suppression by Gender

Gender	Original Numerator	Original Denominator	Orig. % Virally Suppressed
Male	562	642	**87.54%**
Female	296	332	**89.16%**
Transgender	9	15	**60.00%**

Gender	New Numerator	Original Denominator	New % Virally Suppressed
Male	562+1 = 563	642	**87.69%**
Female	296+1 = 297	332	**89.45%**
Transgender	9+1 = 10	15	**66.67%**

Size of denominator: tells us how many clients are being measured.

- If the denominator is very small, percentages can be impacted by just a few people
- If the denominator is very large, it will take more people to impact the outcome

Ways to Analyze a Measure

Stratification: the act of sorting data into distinct groups or layers. Used to identify disparities. For example, viral load suppression by:

- Race
- Gender
- Risk category
- Insurance status
- Income

Correlation does not equal causation, but helps us identify trends and groups to focus on!

2023 – Quarter 1
Part B Viral Load Suppression
by Annual Income

Federal Poverty Level	Numerator	Denom.	% Virally Suppressed
≤ 100%	367	441	83.22%
≤ 200%	232	257	90.27%
≤ 300%	148	156	94.87%
≤ 400%	65	67	97.01%

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Ways to Analyze a Measure

Not-in-Numerator: the clients who did *not* reach the desired outcome. We can then:

- Analyze their disparity characteristics to determine *why* they were not able to reach the outcome, and/or

- Develop targeted interventions depending on number of clients

**December 2022
Agency Viral Load Suppression
for Females**

Race	Numerator	Denom.	Not-in-Numerator	% Virally Suppressed
African-American	122	143	**21**	85%
White	79	90	**11**	88%
Hispanic	27	31	**4**	87%

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Butterfly Effect Game

Background

Process

A series of steps that turns an input into an output

A Patient visit is a process

System

A group of processes with a common aim

Treating HIV is a system

Game Instructions

1 Everyone stand up and find a position in the room where you have free range of motion. Everyone face the center of the room when you've selected your spot.

2 Select two other people in the room but ***keep the names of these two people to yourselves***

3 Now, you must stay equidistant between the two people you have chosen.
If one or both people you've chosen move, then you must also move to maintain equidistance

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Debrief

Ask two volunteers to offer a description of what happened during this game.

Was the movement of the people in the room a process or a system?

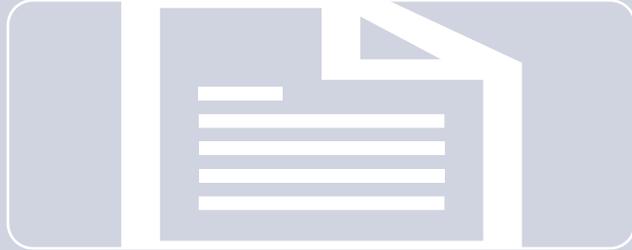**Think about how the exercise demonstrated here today can be applied to the work of the Central Florida HIV Planning Council.**

Standard "A" Exercise

Materials

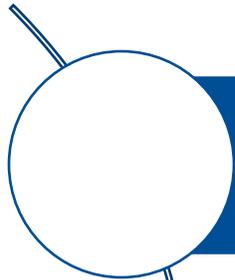For this exercise you're going to need the following materials:
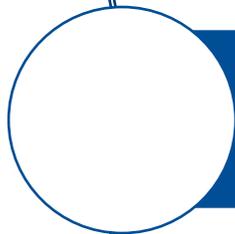

2 Pieces of Paper

Pen or Pencil

Instructions

Draw a circle on the paper

Put the letter 'A' inside it

Draw a line through the circle so it connects to the 'A'

Now Let's Try a Standard Process

1. Fold the Paper in half from the bottom, then in half again, from right to left

2. Open it to see four squares created by the creases.

3. Draw a circle centered in the upper left-hand rectangle filling it to the left and right edges of the crease and edge.

4. Draw a capital letter "A" in the middle of the circle so that it touches the circle on the top center, and the 5 o'clock and 7 o'clock positions at the bottom.

5. Draw the center line horizontally through the middle of the circle, so it aligns with the center of the circle and forms horizontal line in the "A".

Share your standardized "A"'s with the group!

Debrief

- What was the difference between the two drawing processes?
  - Can you think of an example in your work when you expected to draw the standard "A" but had received instructions for the first drawing?
- What went right? What went wrong?
- Is it important to have a clear vision and detailed instructions when improving a process?
- How can we ensure that processes are done with standard methods?
- Other feedback, thoughts, or "a-ha's" about this activity?
  - Implications on your daily work?

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Comments.
Questions?
Suggestions

Thank you all for your time and attention during today's training.