

## **Section 4 – A**

### **Overview of Clinical Quality Management (CQM) Program and Contract Monitoring Process**

#### **Clinical Quality Management (CQM) Program Overview**

The purpose of the Clinical Quality Management (CQM) Program is to establish a systematic approach to quality assessment and performance improvement for the Palm Beach County Ryan White Part A Program. In addition, it meets the Ryan White Part A criteria established by the U.S. Health Resources and Services Administration (HRSA) for measuring and influencing quality of care and patient care improvement.

The mission of the Palm Beach County Ryan White Part A CQM Program is to assure equitable access to high-quality care, to improve clinical outcomes, to maximize collaboration of stakeholders and coordination of services, to ensure high quality customer service, and to ensure compliance with HRSA mandates.

The Palm Beach County Eligible Metropolitan Area (EMA) CQM Program serves to assure that the Ryan White Treatment Extension Act -funded medical providers ensure that services adhere to established HIV treatment guidelines; ensure that strategies for improving medical care include health-related supportive services that enhance access to care and adherence to HIV medical regimen; and ensure that available demographic, clinical, and health care utilization information is used to monitor HIV-related illnesses and trends in the local epidemic. The key components of the Ryan White Part A CQM Program are:

- Performance and Outcome Measurement
- Data Analysis and Presentation
- Identification of Continuous Quality Improvement (CQI) strategies
- Implementation of CQI initiatives
- Monitoring adherence to the standards of care and performance indicators of the services offered by the provider agency
- Coordinating data collection for the provider agency's review by outside organizations
- Identifying processes and procedures for improvement.

Furthermore, in support of the U.S. Department of Health and Human Services (DHHS), HRSA's Mission, "to improve the Nation's Health by assuring equitable access to comprehensive quality health care", the Palm Beach County EMA's CQM Program incorporates HRSA's five (5) long-range strategies:

- Reduce barriers to care
- Reduce health disparities
- Improve quality of care
- Strengthen public health and health care access
- Improve the emergency preparedness of the health care system

## **The goals of the Clinical Quality Management Program are to:**

- Provide a common framework, language, and approach for quality improvement initiatives for providers across the EMA.
- Increase accountability and promote informed decision-making particularly in relation to how to use resources to achieve the best outcomes.
- Support and enable the Planning Council's goal to provide a Continuum of Care.
- Build capacity among the Part A Grantee Office, Planning Council, and Clinical Quality Management Committee to coordinate CQM efforts.
- Provide a way of linking population health indicators and outcomes with health systems performance indicators.

## **Roles & Responsibilities**

The Palm Beach County EMA is given the authority, responsibility, and resources to establish a system-wide CQM Program that covers all structures in the system of care including the Planning Council, Part A Grantee Office, the Part A Funded Agencies, and the consumers of HIV services in the area. The following provides a description of the structures that make up the care system and who will participate in the CQM process.

### **Ryan White Part A Grantee Office Responsibilities:**

The Palm Beach County Board of County Commissioners designates responsibility for management of the grant to the Palm Beach County Department of Community Services (Part A Grantee Office) to ensure that funds are allocated and contracted according to the priorities set by the Planning Council. The Part A Grantee Office also oversees and facilitates the quality management activities throughout all levels of the system. All Part A Grantee Office staff participate in clinical quality management activities at some level, however; the position of Quality Management Coordinator is the one full time employee (FTE) assigned to be responsible for the quality activities outlined here. Other responsibilities of the QM Coordinator include:

- Implementation of the CQM Program
- Assess the quality management activities within the Palm Beach County EMA
- Facilitate the development and implementation of CQI mechanisms and measures for funded agencies.
- Ensure that technical assistance and training is provided to facilitate ongoing improvement of services.
- Provide updates to the Planning Council on CQM activities within the EMA.
- Report service outcome results to the Clinical Quality Management Committee and Planning Council.

In order to continuously enhance our quality management program, the Grantee office has contracted (formally and informally) with outside agencies to conduct internal reviews and trainings. Also, CQM resources and trainings are provided to grantee staff, quality management teams, and agency staff.

### **Palm Beach County HIV CARE Council:**

Participation of the Planning Council in quality management activities takes place through committee structures and processes. Responsibilities of the Planning Council include:

- Review and utilize service outcome and quality assurance data of services in the prioritization and allocation of the Ryan White HIV/AIDS Treatment Extension Act Part A Grant Award for the West Palm Beach EMA.
- Review and utilize service outcome and quality assurance data of services in the advisement of the Ryan White HIV/AIDS Treatment Extension Act Part B Grant Award for the West Palm Beach EMA.
- The Planning Council is educated on the quality assurance activities for the EMA. The Planning Council reviews and comments on the QM Plan.
- The Planning Council is updated on QM activities via the Grantee and Committee reports during monthly meetings.

### **The Ryan White HIV/AIDS Treatment Extension Act Part A Funded Agencies**

#### **Responsibilities:**

The current Ryan White-funded Continuum of Care includes community based health and social service organizations that provide all of the services through contracts with the Part A Grantee Office. The Part A agencies collaborate with one another through the monthly Provider Meetings.

- All Part A funded agencies participate in system-wide quality activities and are responsible for developing quality systems of their own.
- Service (process) indicators and health outcomes are tracked, documented and reported to the Part A Grantee Office through the CAREWare Data System by all funded agencies.
- Part A funded agencies participate in the annual, standardized, EMA-wide Client Satisfaction Survey.

#### **Consumer Responsibilities:**

Consumers of HIV services in the Palm Beach County EMA participate in the planning process through Planning Council membership. They are also encouraged to participate through various client feedback mechanisms in place both system-wide and with individual funded agencies. Consumers are appointed to serve on the CQM Committee.

- Attend CQM training as offered by the Part A Grantee Office (or its consultants)
- Be involved through the Quality Management Committee in providing input for the Standards of Care, developing Quality Service Indicators, and updating the Quality Management Plan.

#### **Clinical Quality Management Committee Responsibilities:**

The Clinical Quality Management Committee shall meet bi-monthly, or as needed, to fulfill committee responsibilities. It is the primary body to help determine measurement priorities and

methods on an ongoing basis. Additionally, the CQM Committee facilitates cross -Part coordination by collaborating with consumers, representatives from Part A&B, and the AIDS Education Training Center (AETC). The CQM Committee is also responsible for:

- Providing input and direction on the Palm Beach County EMA CQM Program.
- Reviewing and updating the CQM Plan annually.
- The Committee develops Standards of Care and outcome measures utilizing Planning Council Committees, in cooperation with the grantee.
- Make recommendations to the Part A Grantee Office for appropriate education relating to quality improvement concepts and techniques.
- The QM Coordinator reports cumulative service outcome results to the CQM Committee which are presented to the Planning Council for review and initiating any improvement plans.

### **Contract Monitoring Process Overview**

Great and broad reaching steps were taken in 2011 to implement the National Monitoring Standards. These efforts have continued as the standards were updated in 2013. Trainings for the Grantee staff and service providers have been held. The program and fiscal monitoring tools have been modified to reflect the National Monitoring Standards. The providers of Ryan White Part A services submit monthly reimbursements and special reports that are required. Monthly expenditure reports are produced and monitored. The EMA conducts fiscal and program monitoring of the service providers on an annual basis. Standardized checklists (monitoring tools) are used in the fiscal and program monitoring process. The tools in use conform to the HRSA Monitoring Standards.

Fiscal and programmatic monitoring site visits occur one time per grant year, at a minimum. Written reports are prepared within 30 days of the site visit and letters are distributed to provider agencies. In the event of a finding that requires a corrective action, a follow-up visit will be scheduled. The follow-up visit will be scheduled within a reasonable time (generally 30 days) for the agency to have implemented the corrective action. If applicable, the Grantee will provide training/technical assistance through in house staff or through HRSA contracted consultants.