# Quality Improvement Committee Meeting Summary - FINAL FAST FACT PAGE

Meeting Date: Friday, August 8, 2008 from 12:00 to 2:00 pm

Start Time 12:15 pm End Time: 2:00 pm

**Location:** Hill Health Center, New Haven

Presiding Chair: Charlotte Burch

**Recorder:** Sara Nichols, Planning Council Staff

## Meeting Accomplishments/Summary of Votes

Reviewed and updated Quality Management plan

Reviewed QM site visit summary report for the new Medical Case Management Standard of Care

## **Council Member Assignments**

• Ensure committee has enough members present to have quorum.

## **Staff Assignments**

Post agenda and meeting minutes on website (<u>www.ryanwhitecare.org</u>)

Update the Quality Management Plan and distribute at October meeting for a vote.

#### Attendance Record - 2008

Committee Members	1/18	3/28	4/18	5/2	6/6	8/8	9/5	10/3	11/7	12/5
Jose Aquino		•								
Henry Bethea			•							
Charlotte Burch	•	•	•	•	•	•				
Ric Browne	•	•		•	•	•				
Christine Romanik	•	•	•		•					
Adaline DeMarrias	•	•	•							
Tom Kidder			•	•	•	•				
Robert Sideleau	•	•	•	•	•	•				
Ryan White Office	•	•	•	•	•	•				
Planning Council Staff	•	•	•	•	•	•				
PC Members & Public Participants	8/8/08 – Deborah Gosselin (Part B)									



#### Welcome and Introductions

Co-chair Charlotte Burch welcomed meeting participants, asked everyone to introduce themselves, and held a moment of silence to honor individuals affected, infected, or who have died from HIV/AIDS. Ms. Burch reminded people that the meetings are open and members of the public and press may be present. Persons wishing to maintain confidentiality of their HIV status should consider the public nature of the meeting.

# Co-Chair Announcements and Meeting Objectives

Charlotte Burch reviewed the agenda for the meeting and asked if anyone had any questions. There were no questions.

# Approval of the Meeting Summary

Quorum was not present to vote. Minutes will be forwarded to next meeting for approval.

### **New/Old Business**

#### a. Review Quality Management Plan

Tom Butcher distributed the final QM plan and facilitated the discussion to review each domain. He stated that although quorum is not present to approve this plan, the activities outlined in the plan are what is being done already for quality management.

- Quality Statement
  - o the goal and mission is stated, consensus this section is ok.
  - o Tom Kidder asked if we have always had the 20-mile radius piece stated.
  - o Tom Butcher responded we had since forming the regional groups to ensure consumers have access.
- Infrastructure
  - o Tom Butcher stated that we may want to add additional activities to allow for more consumer involvement in the QM process.
  - o Ric Browne stated some funders require a consumer survey completed prior to site visits and we may want to consider this.
  - o Tom Butcher stated we may want to build a longer term process for consumer involvement.
- Annual Quality Goals
  - O Goal 1: Tom Kidder suggested we may want to further define what the score means (what is 95%). Tom Butcher agreed that would be meaningful. Bob Sideleau addressed a few typos in the tables (Goal 1, 2 and 3) and suggested identifying "self-assessment" tool for clarity.
  - O Goal 3: Tom Kidder suggested under active #7 to add the QI committee members to review pilot findings. Tom Butcher suggested this would also be an opportunity for consumers to be involved as we hear about the process from the experts before finalizing the standard.
- Data Collection
  - o Bob Sideleau asked if this is client-level data that could be unduplicated.
  - o Tom Kidder stated that DMHAS does track client-level and track access patterns by client-level data analysis.



- Charlotte Burch asked if clients access duplicate services. Tom Butcher responded that
  it could happen, but we are trying to make the system fair and working to go to client
  level data reporting.
- Evaluation
  - o Tom Butcher suggested that every meeting to review the workplans to monitor progress
  - o Tom Kidder suggested adding a column on the workplan tables to site the achievements to date.
- The committee decided that the Standard of Care would be shorten to SOC.

## b. Review Quality Management site visit summary for MCM

- Tom Butcher stated that the quality management site visits were completed for all the TGA contractors between June and July.
- Deborah Gosselin, Part B quality management, was asked if Part B has assessed the new MCM SOC for their providers. She responded that they have completed site visits using the selfassessment tool developed by the NHFF planning council, but they have not compared providers to trend compliance.
- Sara Nichols distributed the summary report including 19 MCM providers (uniquely coded). The committee members were asked to look for any trends with the scores per each standard.
- Tom Butcher added by looking at the lower scored standards, our role is to question whether the standard is worth keeping and/or if it is able to be measured.
- Tom Kidder provided an example that things may not be what they seem. He stated at Hill Health Center the Performance Improvement Committee discovered patients were complaining of a long wait time in the waiting room, then did a study to find out why. It turned out that it was not a system issue but a transportation issue for patients.
- Tom Kidder stated that the issue of tracking referrals is a struggle yet it is important. Technology and techniques are different among agencies and it would be helpful to learn best practices.
- Charlotte Burch stated that it is interesting to learn how agencies are support work. She stated it is amazing to see what is absent in some agencies.
- Deborah Gosselin stated that she has been developing new forms and will be introducing them for all Part B providers, especially as it relates to the care plan (3 month review for core services and 6 month review for support services), along with a 3-page assessment form to meet the criteria for the new standard.
- Tom Butcher stated that it would be good to coordinate all Parts. As Part B tends to be fee-for-service, Part A tends to fund salaries/staff. He further stated that the forms and standards should be more aligned with Public Health Service Guidelines, keeping every 3 months review managing medical systems.
- Tom Butcher stated that case coordination may occur quarterly to assess client medical core services.
- Ric Browne commented that we went from assessing support and basic needs to medical and found that 90% of the clients were not taking their medications, illustrating that this standard is good.
- Deborah Gosselin stated that the Med Assessment Form and upcoming training will be helpful. She stated that long term goal is for Part B to set up a training program to certify providers.



- Tom Butcher suggested the planning and coordination among all parts should occur at a higher level if it would be a State of Connecticut Medical Case Management training program. This would then cover all parts funding sources. Take the best comprehensive across all parts. Tom Kidder stated this was HRSA's goal.
- Tom Butcher suggested looking at all Parts assessment of this standard to develop an all-parts
  training. This would mean convening the collaborative group again. Deborah Gosselin
  responded that this would be helpful to plan the training and agenda together with reps from all
  parts. Tom Kidder added that without the collaborative training, there could get the 2-tiered
  standard of care again.
- Bob Sideleau asked if there would be any activities that the Ryan White Grantee's office would
  do in the meantime regarding the MCM trainings. Tom Butcher responded that he would
  recommend to convene the all parts collaborative meetings about these observations to develop
  a training within all parts. He further stated that administrative action can be taken
  immediately for contractors.

#### **Announcements**

Charlotte Burch announced the next meeting will be Friday, October 3<sup>rd</sup> in New Haven at 12 – 2pm. She stated the agenda would include (1) signing off on the final QM plan, (2) Reviewing Site Reports of all Standards, (3) Report of the start up of the Super Pod, and (4) approving minutes for 6/6 and 8/8.

# Adjournment

Charlotte Burch adjourned the meeting at 2:00 pm