



Quality Management in the Ryan White HIV/AIDS Program

Administrative Overview Ryan White Part B
June 7, 2011

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Ryan White Program 2009 Legislation on Quality

All Ryan White HIV/AIDS Program grantees are required to establish **clinical quality management programs** to:

- Assess the extent to which HIV health services are consistent with the most recent Public Health Service guidelines for the treatment of HIV disease and related opportunistic infections; and
 - Develop strategies for ensuring that such services are consistent with the guidelines for improvement in the access to and quality of HIV services
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- Part A: Sec. 2604.(h)(5)
 - Part B: Sec. 2618.(b)(3)(E)



Program Monitoring Expectations

- Section D: Quality Management
 - Grantee Responsibility
 - Provider/Subgrantee Responsibility



Program Funding Opportunity Announcement

- The Clinical Quality Management (CQM) section of the FOA provides minimum expectations for grantees.
 - Established and implemented a clinical quality management plan;
 - Established processes for ensuring that Primary Medical Care services are provided in accordance with the Department of Health and Human Services (DHHS) treatment guidelines and standards of care; and
 - Incorporated quality-related expectations into Requests for Proposals (RFP) and EMA/TGA contracts.
- Information gathered through the CQM program as well as client-level health outcomes data should be used as part of the jurisdiction's planning process and ongoing assessment of progress toward achieving program goals and objectives. It should also be used by the grantee to examine and refine services based on outcomes.



Key Characteristics of a Quality Management Program

1. A **systematic process** with identified leadership, accountability, and dedicated resources available to the program
2. Use **data and measurable outcomes** to determine progress toward relevant, evidenced-based benchmarks
3. Focus on **linkages**, efficiencies and provider, and **client expectation** in addressing outcome improvement



Key Characteristics of a Quality Management Program (cont.)

4. A continuous process that is adaptive to change and that fits within the framework of other programmatic quality assurance and quality improvement activities
5. Ensure that data collected are fed back into the quality improvement process to assure that goals are accomplished and that they are concurrent with improved outcomes

Elements of Quality Management Program

Key elements have been identified as being critical to development & implementation of a QM program

■ Quality Infrastructure	■ QI Projects
■ Quality Planning	■ Staff & consumer involvement
■ Performance Measurement	■ Evaluation



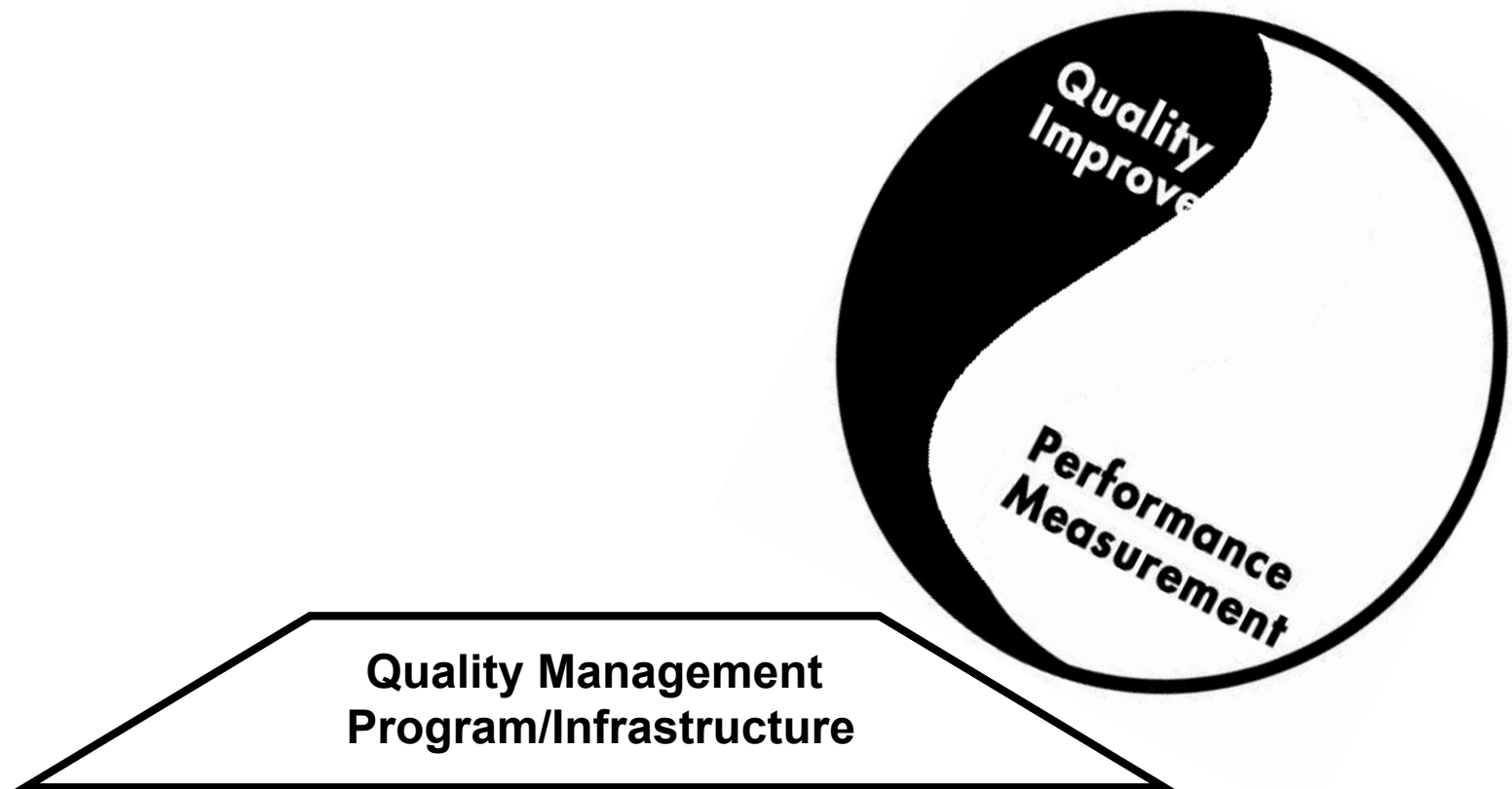
'QI is not QA'

	<i>Quality Assurance</i>	<i>Quality Improvement</i>
Motivation	Measuring compliance with standards	Continuously improving processes to meet standards
Means	Inspection	Prevention
Attitude	Required, defensive	Chosen, proactive
Focus	Outliers: " <i>bad apples</i> " Individuals	Processes Systems
Scope	Medical provider	Patient care
Responsibility	Few	All

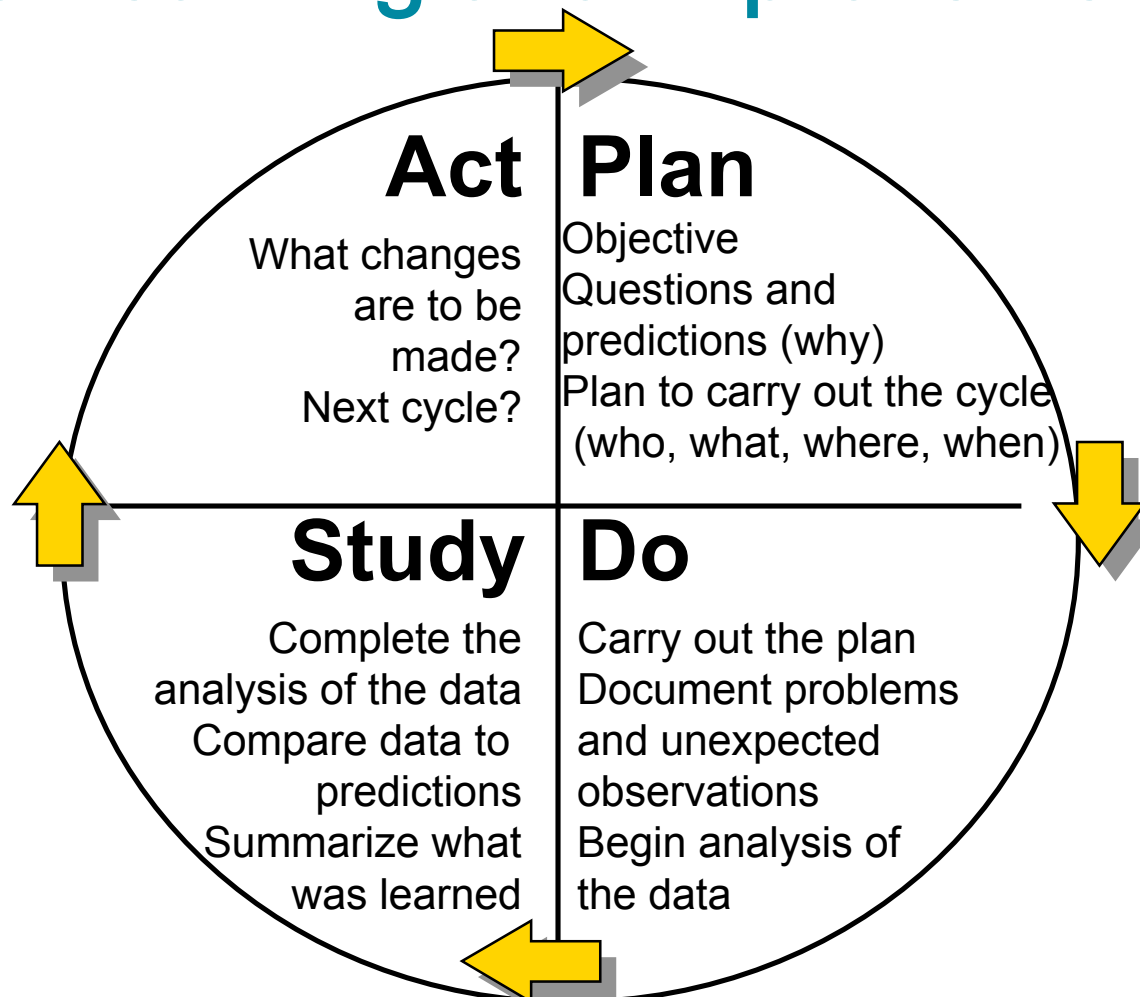
Balance between Performance Measurement and Quality Improvement Activities

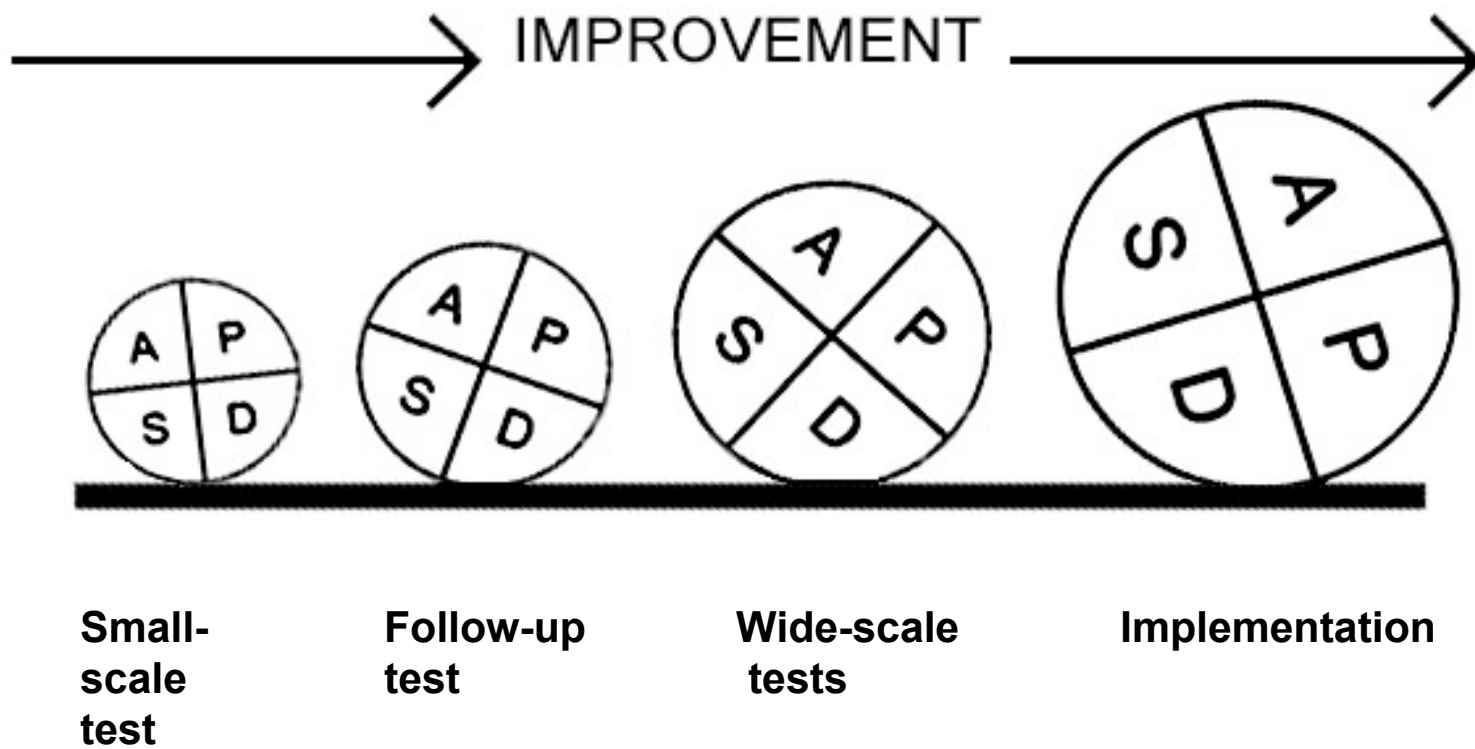


Imbalance between Performance Measurement and Quality Improvement Activities

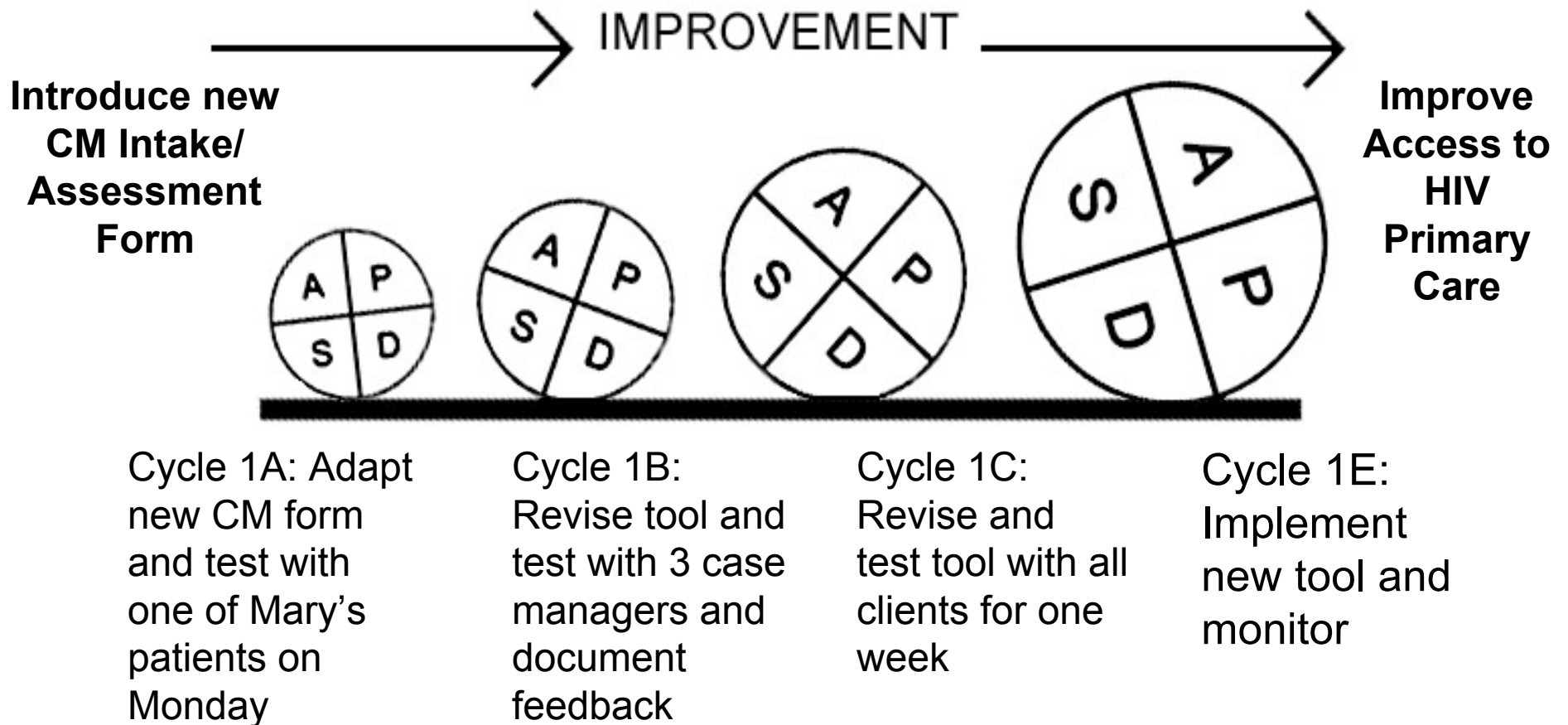


The PDSA cycle for learning and improvement





Start Small and Build...





Tips for PDSA Cycles

- Formulate question and predict results
- Test first in 'safe zones', use volunteers
- Use shorter test cycles to accelerate rate of improvement
- Scale down size of test (# of patients, clinics, time)
- Collect just enough data, not perfect data
- Learn from others 'Steal shamelessly, Share senselessly'
- Just get started! "What can you test by next Tuesday?"



HAB Performance Measures

- Six (6) sets of performance measures
 - clinical care (3 Groups),
 - medical case management,
 - oral health,
 - AIDS Drug Assistance Program,
 - System Level
 - Pediatric

<http://hab.hrsa.gov/special/habmeasures.htm>



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Technical Assistance Cooperative Agreements

- **National Quality Center**
 - Purpose: to provide no-cost, state-of-the-art technical assistance to all Ryan White funded grantees to improve the HIV/AIDS care and the services they provide. NQC aims to build capacity for quality improvement across all Parts as the nation's premiere improvement resource in HIV care nationwide.
 - <http://nationalqualitycenter.org>



National Quality Center

- **Sharing**

- *Website*: The NQC website serves as the central repository for extensive quality-related resources.
- *Quality LINK*: A networking database that connects individuals based on a defined quality improvement need.
- *Various documents & publications*: Examples include Building Capacity of Statewide Quality Management Programs and Measuring Clinical Performance.
- *Phone Consultation*: In response to quality-related questions.
- *ProjectSpace*
- *National Quality Campaign*



National Quality Center

- **Training**

- *On-line Tutorials*: A series of on-line tutorials offered through the NQC's Quality Academy.
- *National TA Conference Calls*: A range of topics are explored during the monthly TA calls on quality-related issues.
- *Training of Trainers (TOT)*: An intensive learning opportunity steeped in adult learning theory and quality concepts.
- *Training of Quality Leaders (TQL)*: Builds the individual capacity of quality managers and those who direct quality management programs to effectively lead and facilitate quality improvement activities.
- *Regional trainings*: Focus on a geographic area and involve all Parts and may be designed to address specific issues within that region.
- *Quality Management Fellowship*: The program includes individualized and group learning activities, involvement in quality improvement projects, and individualized coaching by a quality improvement expert.



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National Quality Center

- Consulting
 - *Intensive on-site consultation:*
Individualized TA to Ryan White Program grantees based on a specific need and defined objectives.



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