

Nassau-Suffolk HIV Health Services Planning Council
Clinical Quality Management Committee
February 25, 2021
Virtual Zoom Meeting

MINUTES

MEMBERS PRESENT:

Joseph Pirone Co-Chair
William Doepper
Juli Grey-Owens
Ana Huezo
Jacqueline Ponce-Rivera
Erik Rios
Anthony Santella, DrPH
Hope Sender
Kerry Thomas
Crissy Witzke
Johnny Mora

MEMBERS ABSENT:

Darlene Rosch, Esq., Co-Chair
Teresa Maestre
Kevin McHugh
Traci Shelton
Claire Simon

GUESTS

Halim Kaygisiz
George Marzen
Melissa Shikora

STAFF:

Georgette Beal
JoAnn Henn
Myra Alston
Katie Ramirez

STAFF Absent:

Nancy O'Keefe

I. Welcome & Introduction

Mr. Pirone, Co-Chair opened the meeting at 10:05am. There was a moment of silence to remember those who have come before, those whom have died, and those currently suffering from COVID-19, as well as the virus.

II. Approval of October 22, 2020 Minutes

Ms. Grey-Owens made a motion and Mr. Doepper seconded the motion to accept the October 22, 2020 meeting minutes as read.

1 Abstention 0 Opposed 9 Approved. Motion carried.

III. Review of CQM Work Plan 2021

Before the review of the 2021 CQM Work Plan, Ms. Beal informed the committee that Ms. Moreau had submitted her resignation. Ms. Nancy O'Keefe, previously from Planned Parenthood, has been hired as Contract Administrator/Quality Manager.

Draft of CQM Workplan-

The EMA CQM Plan is reviewed, evaluated, and updated by the Clinical Quality Management Committee on an annual basis.

- **Goal #1** Maintain a Clinical Quality Management Plan for the purpose of driving and guiding formal assessment and evaluation of the quality of services provided in the

Nassau-Suffolk EMA. An annual Quality Management (QM) work plan is developed for CQM Committee and is reviewed quarterly. The National HIV/AIDS Strategy is utilized to frame CQM activities and goals.

- **Goal #2** Develop, maintain, and monitor service standards for the purpose of establishing minimal health levels of service or care that sub-recipients provide within the Nassau-Suffolk EMA. The objective of this goal is to review service standards for all funded priorities as per HRSA Guidelines. Outcomes/Performance Measures are now separate from the service standards, as per the HRSA directive; all the service standards need to reflect this.

This objective also includes the monitoring of EMA compliance with service standards and the HRSA National Monitoring Standards (NMS). National Monitoring Standards are still in the process of being updated by HRSA. Monitoring is done through the annual site visits, which were conducted virtually in 2020-21. Support is provided to agency related performance and may include technical assistance, corrective action, or addressing areas needing improvement.

The 2021 Ryan White grant application will be multi-year, which will be less burdensome to provider agencies and UWLI staff. However, new requirements are expected with a multi-year contract and a different framework for Unmet Need. Request for Proposals (RFP) for all funded service priorities may be issued.

- **Goal #3** Develop and monitor performance measures for all Part A funded priority categories based on HAB/HRSA Performance Measures and best practices. Performance measures are not required for all priorities. However, regionally, it is important to track outcomes for each funded agency. Each agency has its own work plan. Training and assistance are provided to sub-recipients on how to correctly enter performance management data into the system, and their progress is discussed. United Way and the CQM committee will review all performance outcome data generated by CAREWare and HRSA's QM Module. Potential QI projects stemming from data are recognized. Recommendations to address any identified performance issues are developed and implemented. Information is gathered through (QI) and Quality Management (QM). This information is useful in the bidding process and to prepare agencies for awards with a multi-year contract. It may become necessary to have some monthly meetings in order to get service standards updated. Specific Quality Improvement projects for the funded priority are chosen annually. Report is on the funded priorities, not the agencies.

- **Goal #4** Develop and implement Continuous Quality Improvement (CQI) Initiatives system wide through the EMA. QI initiatives for the EMA are identified annually through data extraction (CareWare, site visits). A QI workgroup is created with delineated roles and responsibilities. A work plan and meeting schedule are developed, these together with findings and interventions are shared during the QWI process. Consumers and providers need to be aware of available resources and how to access those resources. Another objective is to promote and implement provider specific Quality Improvement Initiatives by working with subcontractors to identify program specific projects through data analysis and sharing priority specific data with CQM committee for monitoring and consideration in EMA wide QI projects.

- **Goal #5** Collaborate with HIV Care and Prevention programs in the Nassau-Suffolk EMA (NYLinks, Ending the Epidemic, other HIV prevention care programs) as well as Ryan White Parts A-D. Participate in cross-collaborative QI projects with funded providers,

consumers, and staff. Representatives of RW Parts A-D continue to be encouraged to attend CQM meetings and share QI data and best practices.

An updated version of the CQM work plan with deadlines will be sent to the committee before the April 22, 2012 CQM meeting.

IV. Announcements/Adjournment

- SPARC is offering a virtual 8 week Mind-Body Skills class for women and youth living in Suffolk County. Classes will be on Thursdays from 10am-12pm, beginning April 22. A flyer about the classes is in the weekly grant mailing
- Mr. Doepper informed the committee that Northwell CART has a new chair, co-chair, and treasurer; Ms. Tappan, Ms. Bobe, and Mr. McHugh, respectively. He also announced that Mr. Richard Brodsky will be hosting another 5K cancer run/walk on June 6, 2021 in Baldwin Park. More details to follow.

Mr. Doepper made a motion which was seconded by Ms. Grey-Owens to adjourn the February 25, 2021, CQM meeting. All in favor-motion carried.

V. Membership sub-committee

After much discussion, it was decided to approve the candidate, a former Planning Council member, for balloting. A Survey Monkey link will be sent to Planning Council members to complete for voting. It is important that members be reflective of the epidemic as well as have funded agencies and required categories represented on the Council. Current membership is at 31 members, with an unaligned consumer membership of 35%. Four members are cycling off their second term at the end of September. Two of whom are consumers, three are from Suffolk County, and three are men. The breakdown of men to women is 52%-45%; the number of Suffolk and Nassau County members will be about the same. 33% is the HRSA requirement for unaligned consumer membership on the Planning Council. Recruitment is an ongoing process. Former Planning Council members and current committee members have been contacted, some have already expressed an interest in joining the Planning Council.

A virtual open house is being planned to augment recruitment efforts. The open house would be no more than an hour and a half in length. It would include a brief PowerPoint presentation about the Planning Council and an open panel discussion to allow for Q & A. There was some discussion as to whether an evening open house would have more participants. It is tentatively, planned for April/May.