## Nassau-Suffolk HIV Health Services Planning Council *Clinical Quality Management Committee* February 23, 2023 **Virtual Zoom Meeting**

## **MINUTES**

#### **MEMBERS PRESENT:**

Susan Baldridge Carmen Feliciano Joseph Pirone Jackie Ponce-Rivera Hope Sender Claire Simon Kerry Tomas

# MEMBERS ABSENT:

Angie Partap, Co-Chair Darlene Rosch, Esq, Co-Chair Ana Huezo Johnny Mora Erik Rios Patricia Ross Traci Shelton Ed Soto Crissy Witzke

## **GUESTS**

Cheryl Seifert Maureen Simone

## STAFF:

Nancy O'Keefe JoAnn Henn Katie Ramirez Myra Alston

## **STAFF Absent:**

Georgette Beal

## I. <u>Welcome & Introduction</u>

Ms. Henn welcomed everyone and introductions were made and a moment of silence was requested to remember those whom we have lost, those who are struggling, and those who are in our thoughts.

## II. Approval of October 27, 2022 CQM Minutes

Mr. Thomas made a motion to accept the October 27, 2022 CQM minutes as read. Mr. Pirone seconded the motion.

4 Approved 3 Abstained 0 opposed

## III. Administrative Mechanism

The committee had the opportunity to review the final version of the Administrative Mechanism Survey that was reviewed and revised at the last CQM meeting. Aside from corrected grammatical errors and formatting changes, the Council specific version of the survey remained unchanged. However, there were additional changes for the provider version of the survey. The <u>Monitoring</u> section was removed and replaced with a <u>Contracting</u> section which includes questions about Notice of Award, contracting process, and technical support. In the years when there is a Request for Proposal (RFP) process, as it was in this reported year, a <u>Procurement</u> section is added. The surveys will be sent out next week with a deadline of Friday, March 17, 2023.

## IV. <u>CQM Annual Work Plan Update 3<sup>rd</sup> Quarter</u>

The CQM Work Plan for 2022-2023 has 5 goals:

- Goal 1: Maintain a Clinical Quality Management Plan for the purpose of driving and guiding the formal assessment and evaluation of the quality of services provided in the Nassau-Suffolk EMA. The objective is to annually review, evaluate, and update the EMA's CQM Plan and to monitor EMA compliance with service standards. <u>Progress</u>: This goal was completed early in the grant year.
- Goal 2: Ensure service standard compliance of sub-recipients within the Nassau-Suffolk EMA. <u>Progress</u>: Updated service standards were provided to all sub-recipients prior to their formal presentation at the April provider meeting. Ongoing TA was offered for MCM providers. Revised CQM tool was sent to sub-recipients. Site visits began November 2022 with the last site visit is scheduled for February 28, 2023.
- Goal 3: Monitor performance measures for all part A funded priority categories based on HAB/HRSA Performance Measures and best practices. This goal has three objectives:

  To assess sub-recipient progress in meeting performance measures for funded priorities. Progress: Data manager and quality manager met to discuss performance measures in CAREWare. TA is needed for sub-recipients. Sub-recipients have submitted VLS and care plan data. Although care plans are currently in place, the intent is to move away from care plans and move towards retention in care. 2. Disseminate updated/revised performance measures (included as attachment of service standards) for funded priority categories. Progress: Completed performance measures were reviewed at the April provider meeting. Service standards help ensure compliance. 3. Monitor progress of the EMA's performance on updated/revised performance measures. <u>Progress</u>: Performance measures are included in provider annual CQM review. UWLI CQM approved discontinuing care plans and adding Retention in care to the Performance Measures. VLS and care plan data was requested from sub-recipients for the 3<sup>rd</sup> quarter.
- Goal 4: Develop and Implement Continuous Quality Improvement (CQI) Initiatives system wide through the EMA. <u>Progress</u>: The completed CAREWare data dictionary meets the objective of analyzing data to ensure consistency and accuracy among the sub-recipients. Another objective of this goal is to establish EMA specific Quality Improvement Initiative(s) based on data that identified area/priority that needs improvement. UWLI has begun stratifying data. A QI Initiative may be identified during this meeting. The last objective is to monitor sub-recipient specific Quality Improvement Initiatives. <u>Progress</u>: This was accomplished with receipt of CQI initiatives from each program (March through September) through monthly narratives. The CQI methodology was included in sub-recipient work plans and CQM plans
- Goal 5:Collaborate with HIV Care and Prevention programs in the Nassau-Suffolk EMA (NYLINKS, Ending the Epidemic), as well as Ryan White Parts A-D. The objective is to continually engage other HIV funded programs in Quality Management Planning and Improvement Initiatives in the Nassau-Suffolk EMA. <u>Progress</u>: This effort is ongoing. Ryan

#### White Parts A, and D attend CQM meetings.

#### V. <u>2023-2024 CQM Work Plan Update</u>

The Committee is responsible for creating an annual work plan to help guide its efforts. A draft work plan was presented that includes the following categories: 1. Create Goals; 2. Establish Objectives; 3. Determine Activities; 4. List the Lead and Staff Resources; and 4. Establish Deadlines. Based on a HRSA recommendation, the first goal is to analyze stratification data. This process has already begun in regards to race/ethnicity and some disparities have been identified. A possible second goal is to assess Medical Nutrition Therapy Utilization. Ms. O'Keefe asked the committee to consider the following:

- How best to reach all eligible persons who want /need this service?
- How do we make sure people are benefitting from the services that are provided?
- "Food as medicine"
- Do clients know what MNT is, that it exists?
- For those who haven't accessed these services, are they aware of the benefits?

She stressed that it is not the MNT program that is being assessed, but rather access to MNT services and utilization.

Ms. Maureen Simone and Ms. Cheryl Seifert, both nutritionists and dietitians, were invited to discuss the topic. They agreed that food insecurity should be part of the discussion. Acknowledging that most people understand the importance of good nutrition. Ms. Seifert stated that many of the providers are aware of the MNT program and refer clients. However there are barriers. Not everyone is a good candidate or interested in participating in an MNT program. There are requirements with joining a program. Certain documentation is required. Not everyone is comfortable with sharing their information. The requirement to see a provider every six months can result in medical appointment burden. Transportation is often an issue. Limited public transportation coupled with unreliable taxi and Uber/Lyft drivers impact clients' ability to access services. Food pantries may not be easily accessible; hours of operation may conflict with work, the locations are not always near public transportation routes, transportation services may not be available, SCAT buses only allow passengers two bags, one on lap, the other below the seat. Other barriers include lack of technology and bandwidth availability. Telehealth, when it works, is helpful with keeping clients engaged in MNT. Some clients have lack of technology or are uncomfortable using that technology. The ability to conduct a medical appointment over the phone is also convenient. Clients are able to keep an appointment during their lunch break, saving time not having to travel.

Ms. Simone works at the Edie Windsor Healthcare Center in Hampton Bays twice a week. It is the only time she can access medical records. Receipt of labs is often delayed. Labs are important in order to address issues that may arise as well as meet nutritional need of the client. Ms. Simone expressed concern about the decrease in SNAP benefits (approximately \$95), adding that she has already received many calls regarding this decrease. Working on the east end presents a unique set of challenges. With patients from both the South and North Fork, transportation and access to services can be an issue. Specifically, clients from Shelter Island and Montauk experience poor cell service, bandwidth ability in addition to the transportation challenges. Many of the Edie Windsor clients are seasonal workers, working 40-60 hours during the summer. Nutritional needs aren't necessarily being met during the summer since medical

visits are not being scheduled as the focus and priority is making money, not necessarily health services. Also, there was some discussion as to the wording for reassessments regarding the requirement of *every six months* as compared *to twice a year*. Ms. Simone felt that *twice a year* allowed for more flexibility and would help with compliance.

In the spirit of coordination and collaboration, Mr. Thomas suggested partnering with agencies with resources already available to address food insecurity and fill in the gaps for what is needed. Thursday's Child has food cards through EFA and the Suffolk County Safety Net program. Pamphlets about food pantries, nutritional recommendations, shopping lists, and other related material can be included in the food bags that are distributed. Bus/SCAT passes and other transportation help may be provided under the Suffolk County safety net program for Suffolk residents. This will be helpful for those who have difficulty in getting to food pantries.

Other suggestions to help with food insecurity included:

- Long Island Cares which has an option on their website to find local food pantries by typing in your zip code.
- Senior health centers and some churches may have food programs.
- Meals on Wheels, although there is a waiting list.
- Having non-perishable food items at the agency, available for clients who need them, although there may be licensing requirements with storing such items.

EFA and MNT are not without their limits and restrictions. Questions as to what can be covered under these two priorities should be discussed, especially during the PSRA process.

Ms. Sender suggested a preliminary meeting to discuss ideas on how staff can do engage more clients and steps to implement MNT services. The committee agreed that MNT and its utilization would be a good QI project initiative.

## VI. <u>Announcements/Adjournment</u>

Mr. Thomas from Thursday's Child announced a Long-Term Survivor (LTS) event; on Sunday, May 21, 2023 at 1:30pm. Small groups will also be held in the meantime. Consumers and providers are invited to attend a Ducks game with a pre-game barbecue at 1pm RSVP required. A flyer will be created to include in the weekly mailing.

Mr. Pirone made a motion which was seconded by Ms. Rivera to adjourn the February 23, 2023 CQM meeting.

All in favor-motion carried

## Membership sub-committee

There were no new Planning Council applications to review.