



Quality and Performance Measures (QPM) Team

Meeting Notes September 21, 2022

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Meeting Notes

Participants: Erma Benedetto, Tom Butcher, Christina Del Vecchio, Daniel Davidson, Mariliz DeJesus, Jazmin Diaz, Nilda Fernandez, Clunie Figaro Jean-Baptiste, Jonida Gjika, Tawana Hart, Dan Hulton, Dionne Kotey, Sue Major, Mukhtar Mohamed, Erika Mott, Consuelo Muñoz, Ramón Rodriguez-Santana, Meg Thornton, Lizbeth Vazquez, Melinda Vazquez-Yopp

Facilitator: Peta-Gaye Nembhard

Recorder: Dave Bechtel

Meeting Summary

- **Disparities in Viral Load Suppression.** The team reviewed data on viral load suppression rates by population, and selected a goal for reducing disparities in viral load suppression. The goal is 85% viral load suppression for all populations, just below the overall goal of 87% (see below).

2022-2026 Plan Indicator	2019 Baseline	2026 Goal
Disparities in Viral Load Suppression: Viral load suppression rates among: youth and young adults, injection drug users, MSM, Black men and women, and Latino men and women.	65% to 78% depending on population	85%+ for all populations

- **QPM Priorities for 2023.** The team will focus on its core work in 2023 – including quality improvement and development of the Monitoring Plan. Participants also identified top priorities for data presentations:
 - PrEP data by sub-population
 - HIV testing by population
 - Not-in-Care data (from Data To Care project)
 - Disparities data
 - STIs (sexually transmitted infections) data
- **Future QPM Meetings.** Please note the following changes in the QPM meeting schedule:
 - **QPM will not meet in October**, as the CHPC meeting will be extended.
 - The team agreed to hold an **optional QPM meeting on November 16 at 11:00 am** for a Data To Care presentation.

Identified Tasks

1. CHPC staff will check with DPH on when 2021 viral load suppression data will be available.
 2. CHPC staff will work with DPH and Ryan White staff to estimate the viral load suppression rates for people with HIV (PWH) who are not enrolled in Ryan White.
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Welcome and Introductions

DAC co-chair Peta-Gaye Nembhard welcomed everyone to the Quality and Performance Measures (QPM) Team at 11:03 am. QPM reviews and discusses data, develops indicators to track our progress in HIV prevention and care, and helps improve the quality of HIV prevention and care.

Participants introduced themselves in the chat and approved the August QPM meeting notes without changes.

Updates from the August Meeting

- **Feedback on 2017-2021 Plan.** Dave shared an excerpt from the August 2017 CHPC meeting where Gina D'Angelo reported on federal feedback on the 2017-2021 Plan (see Handout 1 for details).
- **CIRA Partnership.** Daniel Davidson updated the team on a potential partnership with [CIRA \(Center for Interdisciplinary Research on AIDS at Yale University\)](#) to assist in monitoring and evaluating the 2022-2026 Plan. Mr. Davidson reported that CIRA is “happy to help” and that a next step would be to meet with CIRA leadership once the 2022-2026 Plan is finalized (i.e., have developed the final set of strategies and initial performance measures for each strategy).
- **Housing Stability Indicator.** Ms. Nembhard updated the team on the development of a housing stability indicator. Her partner in this effort, Melanie Alvarez, is no longer at ACT, so Ms. Nembhard is seeking another housing partner to help in the development of the indicator. This effort is part of a Data Integration project that engaged HOPWA (Housing Opportunities for Persons with AIDS) and Ryan White partners, and included training for housing case managers and medical case managers. They are working on a crosswalk between the housing data system and Ryan White data system. Ms. Nembhard is also seeking federal guidance on the housing stability indicator.

Viral Load Suppression Data by Population

Ms. Nembhard stated that one of QPM's Parking Lot issues was compiling trend data on viral load suppression by population, in order to set a goal for reducing (or eliminating) disparities in viral load suppression. Heather Linardos (DPH) shared this data, which is also available on the [DPH website](#).

Dave first shared a summary of the Plan indicators and goals that QPM has developed over the past year (see Handout 2). The handout also shows indicators and goals still under development.

Before reviewing the viral load suppression data, the team discussed another potential indicator: people with HIV (PWH) who are **not in care**:

- Tom Butcher noted that this is a critical issue, and that he has seen estimates in the range of 2,000 people.
- Mukhtar Mohamed cautioned about using the 2,000 figure. It is difficult to get an accurate estimate for the number of people out of care. DPH is looking at data for people who may be out of care, which can include people who have moved out of state and cases where DPH did not receive lab tests. As part of the Data To Care effort, Mr. Mohamed is checking all the data



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systems to get a more accurate estimate for those who are truly out of care. DPH is running the data every 6 months, with DIS workers (Disease Intervention Specialists) then following up to determine if people are actually out of care and re-connecting those out-of-care back to care.

- Mr. Butcher asked for a data presentation on people who are out-of-care. QPM was working with DPH to deliver a presentation in 2021, but Mr. Mohamed was called up for military service at that time. (See Page 3 for plans for the out-of-care data presentation in November.)

Dave shared the **viral load suppression trend data** (see Handout 3) and the team then discussed the implications:

- The most consistent and greatest disparities were by age, with **younger people** having lower viral load suppression rates. In the chat, Nilda Fernandez noted that viral load suppression among youth is a constant uphill battle, but that Connecticut is doing better than national results. In the chat, Mr. Mohamed shared a [link](#) showing that Connecticut is doing better than the national average for viral load suppression.
- Given that 2020 data should be viewed with caution, Tawana Hart asked when the **2021 data** will be available? Dave and Sue Major will check on the timing.

The team then discussed **setting a goal** for reducing disparities in viral load suppression. Ms. Nembhard asked the team their thoughts on aligning Connecticut's goal with the NHAS (National HIV/AIDS Strategy) **goal of eliminating disparities** in viral load suppression? For Connecticut, this would mean all populations reaching an 87% viral load suppression rate by 2026.

Mr. Butcher asked what would it take to achieve this? Who would be involved? For Ryan White clients, the viral load suppression rate is already higher than 87%, so the challenge is to improve the rate for **non-Ryan White clients**. Ms. Nembhard agreed that Connecticut needs to have a robust process for non-Ryan White clients. Dave stated that the Ending the Syndemic (ETS) Committee has been discussing ways to do this. Sue Major noted that the new routine testing law can help – by reducing the number of late testers. Mr. Mohamed stated that DPH has implemented a new process where DIS from Partner Services investigate **all newly diagnosed HIV cases** and connect people to care (as needed), and that providers and clinics also call DIS to relay information on new cases for connecting people to care.

Ms. Nembhard suggested that it would help in setting a goal to know the viral load suppression rate for non-Ryan White clients. Ms. Major stated that there is not an easy way to identify Ryan White vs. non-Ryan White clients in their data system. Mr. Butcher asked about the development of a data-sharing agreement between DPH and Ryan White Hartford; Ms. Nembhard stated that this has not been completed yet. Ramón Rodriguez-Santana noted that non-Ryan White clients might not want to disclose information about their status (beyond provider reporting requirements), but that DPH can **estimate the viral load suppression rate for non-Ryan White clients** using existing statewide and Ryan White data.

In the chat, Ms. Fernandez suggested **strategies** for reducing disparities outside of Ryan White:

- Provider detailing; increasing provider education and engagement.
- Establishing a providers' email LISTSERV and using an email marketing campaign.



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- Integrating provider awareness via a PPCT (Positive Prevention Connecticut) campaign. Ms. Major reported that PPCT is working on a provider campaign for the new routine testing law.
- Mr. Butcher asked if DPH can identify providers where patients have low viral suppression rates? This could help in identifying providers to engage. As an example of this approach, Ms. Major noted that Mitch Namias (CADAP) used data to identify providers prescribing old regimens.

Mr. Butcher suggested **setting an initial goal of 85% viral load suppression for all populations**, just below the overall goal of 87%. QPM can continue to gather data, assess our progress, and discuss ways to achieve this goal. Participants **agreed by consensus** to adopt this as the goal.

Setting Priorities for 2023

Ms. Nembhard noted that there will not be committee meetings in October, so this will likely be our final (required) QPM meeting for the year. QPM has devoted most of our meetings this year to developing the indicators and monitoring process for the 2022-2026 Plan. This means we have a fairly long list of activities / topics to address in the future, including Parking Lot suggestions.

Dave reviewed the core QPM work (i.e., quality improvement, monitoring plan) and potential data presentations / indicator development (see Handout 4 for details). The team confirmed QPM's core work and then took a poll to identify 2023 priorities for data presentations. The top priorities were as follows:

Percent	Topic
63%	PrEP data by sub-population
63%	HIV testing by population
56%	Not-in-Care data
50%	Disparities data (deep dive)
31%	STIs data

Summary and Next Steps

The team discussed whether to hold an **optional November meeting**. Mr. Mohamed stated that he could present on Data To Care (pending DPH approval) in November based on data queried in November 2021, or could present at the January 2023 meeting on data queried in June 2021. In each case, the query looks back 15 months to identify people who may be out of care. DPH's approach conforms with CDC guidance to perform these efforts every 6 months.

Ms. Nembhard and Mr. Butcher suggested scheduling the presentation for November. This presentation has been delayed due to Mr. Mohamed's military service and QPM's work on the plan. Ms. Nembhard stated that she'd rather not wait until 2023, and suggested that there would be much interest in the presentation. Mr. Mohamed agreed, and will plan to present on November 16, 2022 at 11:00 am.



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Ms. Nembhard thanked everyone for all of their work on the indicators and monitoring plan this past year. QPM has accomplished a great deal, and contributed greatly to the 2022-2026 Plan.

Adjourn

The meeting adjourned at 12:30 pm.

##End QPM Notes##