Appendix 4

Oakland Eligible Metropolitan Area Quality Management Plan

Background and History
The United States Congress enacted the Ryan White Comprehensive AIDS Resources Emergency (C.A.R.E.) Act on August 18, 1990. The goal of the CARE Act is to improve the quality and availability of care for individuals and families infected and affected by HIV disease by providing emergency assistance to regions most severely affected by HIV epidemic. The legislation was reauthorized in 2000, in which all CARE Act programs were directed to develop and implement quality management programs. The purpose of the HRSA's Quality Management Program is to:

• Assess the extent to which HIV health services are consistent with the most recent Public Health Service (PHS) guidelines for the treatment of HIV disease and related opportunistic infections.

• Develop strategies for ensuring that such services are consistent with the guidelines for improvement in the access to and quality of HIV services.

Expectations
Emphasized in the Ryan White CARE Act Reauthorization Technical Assistance meeting held in June of 2001, Quality Management Programs are pivotal in addressing the following key CARE Act themes:

• Improve access to and retention in care for HIV+ individuals aware of their status

• Quality of services and related outcomes

• Linkage of social support services to medical services

• Ability of the program to change with the epidemic

• Use of epidemiological and health outcome data for priority setting

• Accountability (resources, responsibility, implementation, etc.)

Oakland Eligible Metropolitan Area Quality Management Program
The Oakland Eligible Metropolitan Area (EMA) is committed to developing and implementing its Quality Management Program in cooperation with Title I consumers and providers. In 2003, the Oakland EMA established its Quality Assurance Program in accordance with Health Resources and Services Administration's (HRSA) HIV/AIDS Bureau mandate that places greater emphasis on evaluation activities as a core component of Federal grants. The Quality Management Program is a unique and ambitious compilation of quality assurance activities. The primary focus of the Oakland EMA is to improve on quality management activities currently in place and implement new strategies from best practices. The primary focus is to improve health outcomes for individuals in the EMA.
Mission
The mission of the Quality Management Program is to ensure that all people living with HIV/AIDS in Oakland EMA receive the highest quality of funded primary medical care and support services.

Purpose
The purpose of the Oakland EMA Quality Management Program is to:

- Assist Ryan White funded medical service providers in ensuring that services adhere to HIV clinical practice standards and Public Health Service (PHS) guidelines
- Improve the quality of care/services and increase the probability of desired patient outcomes
- Promote principles of continuous improvement in quality by;
  - Assessment of current database or improving on a database to collect outcomes
  - Providing continuing education and training to providers, consumers, and grantee staff.
  - Soliciting input on improvement from consumers and providers.
  - Conducting small test of change—Plan, Do, Study, Act (PDSA Cycle)
  - Using the Chronic Care Model as a guide for quality improvement or building on existing models.
- Provide mechanisms to identify opportunities for improvement in care and services, and use the results of these activities to develop "lessons learned"

Goals and Objectives
The goals of Oakland EMA Quality Management Program for year 2003, 2004, and 2005 are as follows:

Goal 1: Develop a Quality Assurance Plan
- Hire Quality Assurance staff
- Assess present quality management activities in the Oakland EMA
- Present a draft quality management plan to CQI committee, Contra Costa County and Executive Committee
- Request input from Planning Council members, contractors, providers, consumers, and CQI committee
- Planning Council, Contra Costa County and grantee staff to review and approve the quality management plan
- Evaluation of the quality management plan by grantee, Council, contractors and providers
Goal 2: Enhance Continuous Quality Improvement

• Promote uniform methodology for all quality assessment activities (e.g. IHI Collaborative Chronic Care Model, FOCUS-PDSA Cycle or currently used models)

• Support strong partnerships with all stakeholders to move the quality initiative forward

• Educate grantee staff, planning council members, and providers on the Chronic Care Model

• Assist service providers in developing a Quality Management Plan

• In coordination with stakeholders develop performance indicators, which are linked to optimal measurable outcomes for all service categories, administration, and Planning Council

• Update and revise Standards of Care

• Revise program monitoring tools

• Review standardized reporting mechanism for program monitoring

• Pilot a client satisfaction survey for Alameda County

• Continue to conduct client satisfaction in Contra Costa County

• Provide outcome data to planning council for priority setting and allocations

Goal 3: Improve Data management in the Oakland EMA

• Conduct Technological Assessment in Oakland EMA

• Evaluate current data collection and consider revisions of tools

• Develop appropriate training and development programs compatible with data collection for providers and grantee staff

• Analyze data collected and make recommendations for improvement of services

Goal 4: To educate Planning Council, and consumers on Quality Assurance and Chronic Care Model

• Assess training need of Planning Council Members and PLWA

• Develop curriculum with AIDS Education and Training Center (AETC) and Office of AIDS Administration (OAA) staff and develop three objectives for training

• Plan and conduct trainings

• Evaluate trainings and revise curriculum

• Provide monthly updates to Planning Council Members
Accountability

The Oakland EMA’s leadership is highly dedicated in the quality improvement process and provides guided effort in implementing the Quality Management Program. The Office of AIDS staff is vitally interested in the assessment of the effectiveness of the Quality Management Program in order to make changes in the program that will keep it on the cutting edge of progress and effective, efficient, high-quality patient care. The Oakland EMA Grantee has the overall responsibility and accountability for the quality of care and services delivered. However, the Oakland EMA Continuous Quality Improvement Committee and grantee staff will ensure that the services and practices of the agencies are of the highest quality. Reports from the Quality Assurance staff will be provided to the CQI Committee. The CQI Committee will report to Planning Council.

I. Planning Council Responsibilities:

Federal Legislative requirements expect the Planning Council to review and utilize service outcome and quality assurance data of services in the prioritization and allocation of Ryan White Care Act Title I awards for the Oakland EMA. The Planning Council will be educated on Chronic Care Model and Quality Assurance activities for the EMA. The Planning Council will review the Quality Management Plan, the Standards of Care, and service indicators for approval and tools for monitoring outcomes. The Planning Council will be updated on QA activities on a monthly basis.

II. Consumer Responsibility:

Attend QA training offered by AETC and OAA to increase understanding of CQI implementation. The consumers will be involved in implementing CQI activities of specific emphasis are the Standards of Care, and service outcome indicators. Consumers who are qualified may participate in grantees site visits, and will also assist with evaluation of QM activities in Oakland EMA.

II. Continuous Quality Improvement Committee

The Continuous Quality Improvement Committee will provide input and direction on the Oakland EMA Quality Management Program. The Committee shall meet quarterly, or as needed to fulfill committee responsibilities. The Committee shall review and update the Quality Management Plan annually; establish quality assurance processes and conduct evaluation activities. The CQI Committee shall determine program priorities, performance measures, and identify indicators to assess and improve performance. The committee shall make recommendations to the grantee for appropriate education relating to quality improvement concepts and techniques. The committee shall report cumulative service outcome results to the Planning Council, Executive Committee and Service Committee. The membership of the CQI Committee may number at least seven individuals, to include at a minimum:

- Medical Directors
- Consumers
- Program Administrators
The CQI Committee will hold meetings with the grantee at least quarterly to provide recommendations on the findings from the ongoing monitoring and evaluation of the quality of care and treatment provided to clients. Recommendations of the CQI Committee will be made directly to the Planning Council.

III. Grantee Responsibilities

The Quality Management staff will lead and facilitate the development of a Quality Management Plan, assess the quality management activities in the Oakland EMA, oversee activities conducted and facilitate the development and implementation of CQI mechanisms and measures for funded agencies. In addition, the QM staff will also provide technical assistance and training to contractors to ensure ongoing improvement of services. The QM staff will provide monthly updates to the Planning Council on QA activities in the Oakland EMA.

IV. Ryan White Care Act Title I & II funded Agency Responsibilities:

Develop a quality management plan. Develop work plans that integrate the chronic care model. Track and document service outcomes. Report service outcomes results to the Grantee. Implement corrective action internally as indicated. Implement Focus PDSA (Plan, Do, Study, Act) CQI model for process improvement or current model for quality improvement. Conduct Client satisfaction survey and report results.

Resources

Oakland EMA Title I/II grantee has assigned 4 percent of the annual grant to evaluation and quality assurance activities. A Quality Management Team will be hired and dedicate their time to assess, implement, and assist contractors in conducting quality management activities at funded sites throughout the EMA. The Institute for Healthcare Improvement staff will provide technical assistance as needed.
Quality Management Priorities
The Quality Management Plan encompasses all the aspects of care and services provided in Alameda County. The Oakland EMA priorities are to:

- Support an active Continuous Quality Committee
- Educate service providers on Chronic Care Model and PDSA Cycle
- Support/assist agencies in the development of a quality management plan specific to HIV Services
- Review and update standards of care for primary care, case management, and other service categories
- Review and provide recommendations on current data collection system
- Review and suggest revisions, if necessary on the grievance procedure for agencies, Planning Council, and grantee
- Continue to conduct a standardized client satisfaction survey for Contra Costa County and develop and pilot a standardize client satisfaction for Alameda County.
- Review and consider improvements to program monitoring tools

Quality Management Activities
I. Quality Management Assessment Survey
The QM team developed an assessment tool to identify if the Title I Oakland EMA service provider agencies have a quality management plan specific to HIV services, in order to assess existing quality management activities throughout the Oakland EMA, and to determine which agencies have a QM plan in place, and how extensive they are. This survey will provide a baseline for existing quality management activities and also provide valuable information where the EMA Response Team should focus on and provide technical assistance to service providers in implementing a QM plan specific to HIV Services, including compliance with the Health Insurance Portability and Accountability Act (HIPPA).

II. Develop an Agency Specific Quality Management Plan
Based on the information gathered from the Quality Assessment survey, the quality management team will help Oakland EMA provider/agencies develop and implement an individualized Quality Management Plan that is specific to HIV/AIDS services. The Quality Management plan will represent a critical step to measure and document the quality of its services. The quality management plan will help agencies to evaluate and identify improvement opportunities.

III. Training Program
The Oakland EMA will build upon lessons learned through its successful collaboration with the Institute for Health Care Improvement (IHI) by leading its own series of learning sessions focused on improving care for people infected with HIV using the Chronic Care Model and PDSA Cycle.
The quality management team will schedule a series of training sessions for agencies and providers through the Oakland EMA. The training will help increase provider knowledge regarding the chronic care model and PDSA Cycle, and provide guidance to staff. As a result the service providers will be able to apply the models to improve their delivery of care to HIV/AIDS infected clients.

**IV. Update/Revise Standards of Care**

The Standards of Care were initially developed by the Oakland EMA in order to establish baseline standards for AIDS service across the metropolitan area. The CQI Committee in collaboration with provider workgroups (Alameda and Contra Costa County) shall review the current Standards of Care and provide recommendations and inputs. A draft will be developed by the quality assurance staff and presented to the CQI committee for review and forwarded to the Services and Executive Committees of the Planning Council. The final draft will be presented to the Planning Council for approval.

**V. Technological Assessment**

Based on the information gathered from the quality management assessment survey, the quality management team will next conduct a technological assessment of all Ryan White funded Care & Treatment sites in the Oakland EMA, using a tool designed to identify current technologies and software applications in use at each agency. The survey will help the QM team to determine the technology skills and capabilities of agency, to evaluate current database and software applications, and to explore the possibility of centralized database development and/or improvement.

**VI. Performance Indicators**

Measuring the outcome of programs is an essential element in providing quality services. Outcomes help track the progress of the individual clients in the continuum of care, and ensure a consistent standard of care throughout the entire system. The QM team will review the existing action plan, and work with the service providers to address areas in which agencies may have difficulty in tracking outcomes. The CQI Committee in collaboration with the service providers and consumers will develop indicators for each service category, and the quality assurance staff will develop tools to collect data for indicators by chart abstraction and semi annual reports. QM and CQI staff will review results collected. Written reports will be presented to the Planning Council by the quality management team annually. An annual review of indicators and analysis of indicators with CQI, providers, Planning Council, and consumers will be conducted. The grantee is in the process of developing a CQI committee, which collaborates with Title III, IV and the AETC and consumers to discuss and implement joint efforts across Titles. Reporting to the Planning Council members will occur monthly.
Approaches/Methodology
The plan provides for a systematic monitoring and evaluation of the quality of care/service applied throughout the agencies. The Oakland EMA’s effort is to incorporate quality planning with an emphasis on performance and outcomes of care. The methodologies that the Oakland EMA has adopted have been adapted from the IHI Collaborative 10-step Chronic Care Model for monitoring and evaluation and FOCUS-PDSA methodologies.

Evaluation
Service providers, Planning Council members, CQI Committee members, consumers, and grantee QA staff will work collaboratively throughout the year and conduct a year-end evaluation in early 2005. In addition each funded agency will be asked during site visits about their QM activities for the year. A chart of activities and required documents for each agency will be developed and serve as an overall view to determine if each provider is adhering to best practice standards to ensure services consistently meet and exceed minimal requirements. Evaluation results will be derived from program monitoring processes, client satisfaction surveys, outcome measures, and data from client intake forms. CQI committee members will review the evaluation and recommend a plan for improvement to the Quality Management Staff. Evaluation results across service categories will be made available to the Planning Council and consumers in a timely manner to be useful in the annual priority setting process and resource allocation decisions.

Summary
Throughout the year, the QM staff will collaborate with service providers, consumers, CQI Committee members and the Planning Council to continuously work together to improve care, thereby making significant changes that improve clinical outcomes and reduce cost. The Collaborative can share the changes that work best, the lessons they learn and, and the pitfalls to avoid. Everyone plays a valuable part in improving the quality of services provided to people living with HIV/AIDS in Oakland Eligible Metropolitan Area.