HUMAN SERVICES DEPARTMENT
COMMUNITY PARTNERSHIPS DIVISION
115 S Andrews Avenue, Room A360 • Fort Lauderdale, Florida 33301 954-357-8647 • FAX 954-357-8204

QUALITY NETWORK MEETING
Wednesday, July 29, 2020
WebEx Virtual Conference Room

MINUTES

PROVIDERS PRESENT
Billy Gall; AHF
Amy Pinter; AHF
Glynette Roberts; BCFHC
Claudette Grant; Broward Health
Diana Brown; Broward Health
Jamie Powers; Broward House
Gillian Cross-Hogg; Broward House
Natasha Markman; BRHPC
Ariel Williams; Care Resource
Macgledys Llera; Latinos Salud
Kara Schickowski; Legal Aid
Courtney Magnus; Coast to Coast Legal Aid
Mark Schweizer; Nova
Kaitlin Mooney; Nova
Frank Young III; Poverello
Pamela Rodriguez; Memorial
Zulma Muneton; CDTC

GUESTS
Susy Martinez; Behavioral Science Group
Geoffery Downey; Behavioral Science Group

CLINICAL QUALITY MANAGEMENT (CQM) SUPPORT STAFF
Debbie Cestaro-Seifer
Marcus Guice
Jessica Seitchick

PART A RECIPIENT STAFF
Kelsey Giglioli
Neil Walker
Timothy Thomas
Wismy Cius

I. Call to Order

The meeting was called to order at 9:00 a.m.

II. Welcome/Introductions

CQM Support Staff welcomed everyone, made a statement of the goal for the meeting, and individual introductions were made.

III. FY 19 Data Review

The FY19 data presentation can be found in the meeting packet.
CQM support staff provided a brief overview of the FY 2019-2020. The presentation contained HIV viral suppression and retention in care trend data, HIV Care Continuum Data, comparative analysis on viral suppression across various demographic groups, and client utilization data.

IV. Presentation of Findings from 2017-2019 Needs Assessment

The Brief Behavioral Health Assessment can be found in the meeting packet.
CQM support staff member provided a summary of the findings from the 2017-2019 Needs Assessment and noted that providers interested in taking part of the upcoming needs assessment process should consider joining the System of Care Committee of the HIV Planning Council.

V. Quality Q&A

The CQM Support Staff gave the opportunity for the Quality Network Members to ask questions regarding the 2020 Quality Improvement (QI) Process and any limitations they may be experiencing in completing their first checkpoint in the process in lieu of the Covid-19 pandemic.

One provider noted that their agency is working with fewer staff members and have had to adjust their processes to include screening clients for Covid-19 symptoms. Additionally, the provider noted that due to the extension granted by the Ryan White Program for eligibility recertification, clients do not have to have to get their labs completed, which leads to data measurement constraints. This seems to be a problem primarily with clients already in care as newly engaging clients' labs are updated. Another provider noted that currently Quest Diagnostics is currently backed up and it has taken longer for lab results to be submitted. Another limitation noted by the providers were fear and anxiety to make appointments due to Covid-19 concerns.

The CQM Support staff emphasized that they are understanding of the difficulties in conducting quality improvement during the current Covid-19 crisis and that providers should communicate whether they can meet the deadlines in the QI Process Planner. This Planner serves as a guide for providers to follow in the development of their QIPs, so open communication of setbacks and challenges is important when approaching quality improvement and adapting project to meet the unique needs of each agency. A provider suggested that some agencies could consider focusing improving upon QI processes that are already established, such as electronic surveys.

VI. Agency Updates

- Broward Community Family Health Centers – The agency has begun PrEP enrollment and have established clinic telehealth days (Monday, Wednesday, & Friday).

- Broward House – Currently has open Disease Case Management Positions and ALF is accepting HOPWA transition clients.
- Broward Regional Health Planning Council – Has continued to provide online eligibility.
- Care Resource – Has hired a new Quality Assurance/Quality Improvement Manager
- Latinos Salud- has continued onsite testing and PrEP program
- Nova Southeastern University – is now open and providing services
- Memorial Healthcare System – is currently providing telehealth and in-person visits and HIV testing at the same sites.

VII. Announcements

The housing fields in Provide Enterprise are now locked and providers can now only select conditional housing types based on housing status selected.

Timothy Thomas, the new addition to the Recipient Staff, is in charge of the Cares Act Data Report.

VIII. Adjournment

The meeting was adjourned at 10:36 a.m.

Next Meeting Date: September 9, 2020

GET CARE BROWARD
TREAT HIV | BEAT HIV
RYAN WHITE | PART A

1

FY2019-2020 Broward County EMA Part A Data Overview

Quality Network

Presented by BRHPC CQM Support Staff- Jessica Seitchick,MPH and Marcus Guice, MPH

1

2

Overview

Data Reporting

- Data is pulled per FY (3/1- 2/28(29))
- Care Continuum data includes only clients who are HIV+ and have used 1+ service units during the reporting period
- Service utilization data includes only *billed* and *paid as billed services*

Limitations

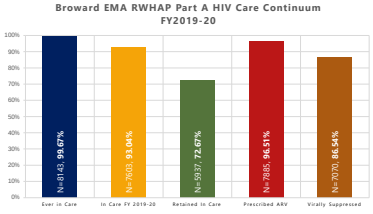
- Challenges in data quality for certain factors
- Limitations in what data are aggregated in the HIV MIS (PE)
- Data values indicate what the final value for the FY is and do not indicate change in status throughout the year

2

3

HIV CARE CONTINUUM

- A total of 8,170 clients are included in Care Continuum
- Viral Suppression is 86.54%
  - Most recent FL-DOH data (2018) report 66% viral suppression overall in Broward County (Ryan White and non-Ryan White clients)



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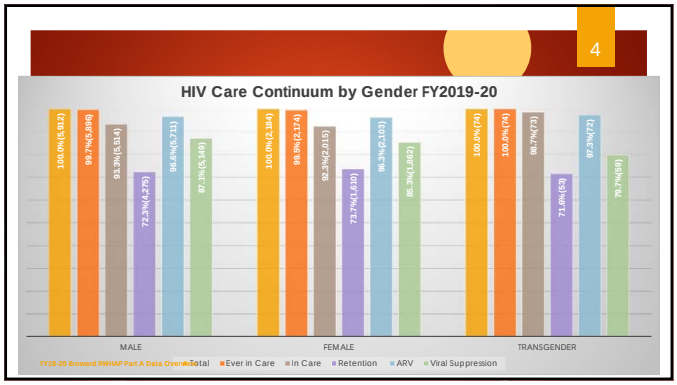
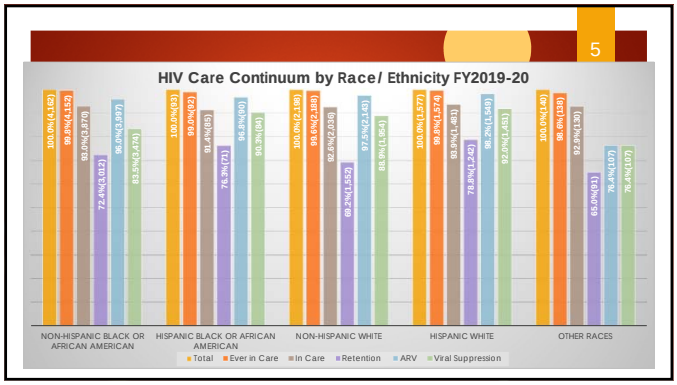
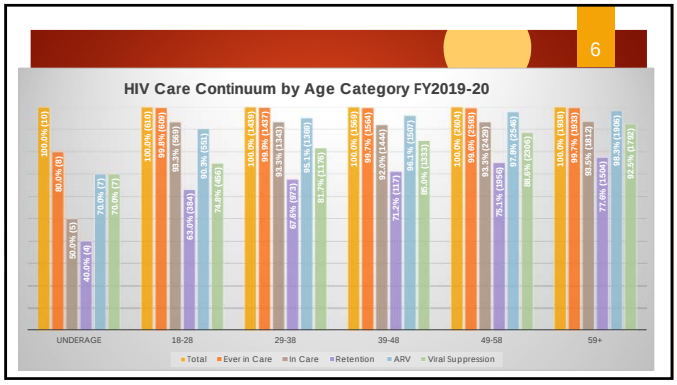

4
HIV Care Continuum by Gender FY2019-20
100.0%(6,912)
99.7%(6,898)
93.3%(6,514)
72.5%(4,275)
98.8%(6,711)
87.1%(6,349)
100.0%(2,184)
98.5%(2,174)
82.3%(2,015)
73.7%(1,610)
98.3%(2,103)
85.9%(1,802)
100.0%(74)
100.0%(74)
98.7%(72)
71.6%(53)
97.3%(72)
79.7%(59)
MALE
FEMALE
TRANSGENDER
FY19-20 Broward RWHAP Part A Data Overview
Total
Ever in Care
In Care
Retention
ARV
Viral Suppression

4


5
HIV Care Continuum by Race/ Ethnicity FY2019-20
100.0%(4,162)
99.8%(4,152)
93.0%(3,870)
72.4%(3,012)
96.0%(3,997)
83.5%(3,474)
100.0%(93)
99.0%(92)
91.4%(85)
76.3%(71)
96.8%(90)
90.3%(84)
100.0%(2,159)
99.6%(2,149)
92.6%(2,036)
89.2%(1,552)
97.5%(2,143)
88.9%(1,954)
100.0%(1,577)
99.8%(1,574)
91.9%(1,451)
76.8%(1,212)
98.2%(1,549)
92.0%(1,451)
100.0%(140)
98.6%(138)
92.9%(130)
65.0%(91)
76.4%(107)
76.4%(107)
NON-HISPANIC BLACK OR AFRICAN AMERICAN
HISPANIC BLACK OR AFRICAN AMERICAN
NON-HISPANIC WHITE
HISPANIC WHITE
OTHER RACES
Total
Ever in Care
In Care
Retention
ARV
Viral Suppression

5


6
HIV Care Continuum by Age Category FY2019-20
100.0% (10)
80.0% (8)
60.0% (6)
40.0% (4)
70.0% (7)
70.0% (7)
100.0% (610)
99.8% (609)
93.3% (569)
63.9% (384)
90.3% (551)
74.8% (456)
100.0% (1,459)
99.9% (1,457)
93.3% (1,361)
67.6% (972)
95.1% (1,388)
81.2% (1,185)
100.0% (1,559)
99.7% (1,554)
92.8% (1,446)
72.2% (1,127)
96.1% (1,497)
85.0% (1,325)
100.0% (2,604)
98.6% (2,569)
93.3% (2,429)
75.1% (1,956)
97.0% (2,540)
88.6% (2,306)
100.0% (1,918)
99.7% (1,913)
85.5% (1,612)
77.6% (1,505)
98.3% (1,890)
92.5% (1,780)
UNDERAGE
18-28
29-38
39-48
49-58
59+
Total
Ever in Care
In Care
Retention
ARV
Viral Suppression

6

Viral Suppression & Retention in Care Trends – FY15 – FY19

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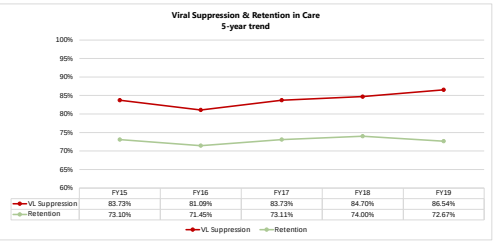

- Overall Viral Suppression is currently at the highest rate
  - Viral Suppression has increased overall
- Retention has been variable during the past 5 years and has decreased in the past FY

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FY 19-20 Service Utilization - Overview

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Service	Total Clients
Part A Overall	8,149
CIED	7,845
Case Management (Non-Medical)	2,187
Disease Case Management	693
Food Bank/Voucher	2,027
Legal Services	158
Mental Health	177
Integrated Primary Care and Behavioral Health	3,632
Oral Health Care	2,879
Pharmacy	2,031
Substance Abuse	113
Health Insurance Continuation Program (HICP)	894

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Service Utilization Trends- Core Services

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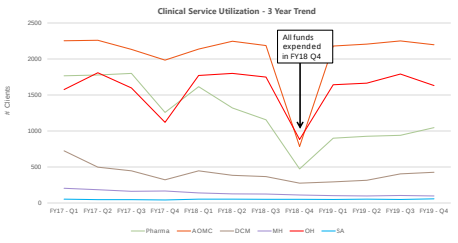

- Pharmacy- decreased over past 3 years; may be associated with increased medication coverage on ADAP formulary
- AOMC/ Integrated Primary Care and Behavioral Health, DCM, Mental Health, Oral Health and Substance Abuse - remained consistent with minor blips over the 3-year period

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Support Service Utilization Trend

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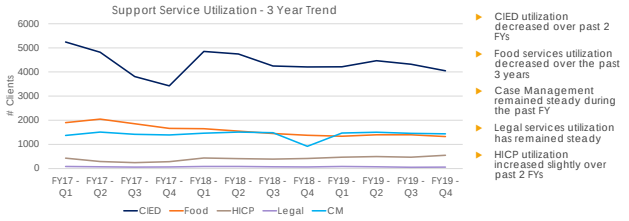

- CIED utilization decreased over past 2 FYs
- Food services utilization decreased over the past 3 years
- Case Management remained steady during the past FY
- Legal services utilization has remained steady
- HICP utilization increased slightly over past 2 FYs

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BROWARD CLIENT-LEVEL OUTCOMES & INDICATORS

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- For local Outcomes and Indicators data, see *Appendix A* in meeting packet

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Summary

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- Viral suppression has increased since FY18-19
  - Lowest viral suppression rate among:
    - Non- Hispanic Black or African American clients
    - Clients aged 18-28 years
- Overall service utilization decreased slightly since FY 18-19
  - Variable by service category

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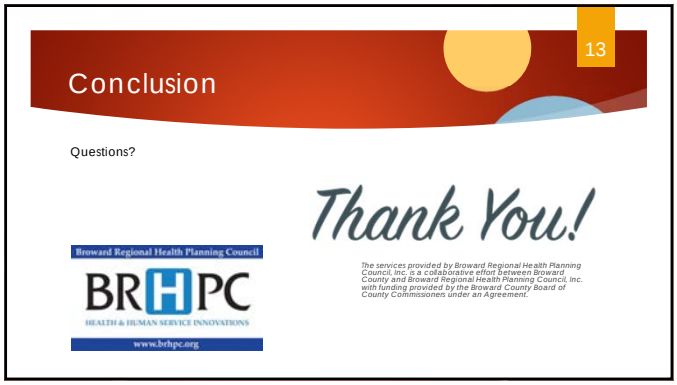
13
Conclusion
Questions?
Thank You!
Broward Regional Health Planning Council
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2017-2020 Broward County HIV Needs Assessment Findings- A Focus on Opportunities for Quality Improvement

Quality Network

Presented by BRHPC CQM Support Staff- Jessica Seitchick, MPH and Marcus Guice, MPH

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1

Needs Assessment Background

Conducted by the Ronik-Radlauer Group

The full Needs Assessment report can be viewed at https://brhpc.org/needs-assessment-2019/

This presentation only discusses findings relevant for quality improvement

2

Groups and Participants

Group	# of Participants
Key Stakeholder Interview- Provider	1
Key Stakeholder Interview- Black Women	7
Focus Groups-People with Lived Experience (Individuals with substance use and/or mental health conditions at Broward House; Long-term survivors at World AIDS Museum; Black women at Comprehensive Care Center; Transgender Support Group)	63
Focus Groups- Providers (Disease Intervention Specialists at FDOH-BC ;HIV Medical Case Managers; Doctors and Disease Case Managers; Medical Provider Network)	35
Survey- People with HIV	195
Survey- Provider	12
Total	313

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Summary of Challenges and Opportunities for Improvement

Challenge	Reported within	Opportunities for Improvement
Knowledge of resources and system navigation	Key Informant Interview (Provider), Focus Group (Provider), Survey(PLWH, Provider)	Resource Guide, Hotline, Peer Navigators,
Systemic issues that could lead to lack of continuous engagement of care	Key Informant Interview (Provider), Focus Group (PLWH)	Using telehealth, and creating one-stop-shops for services to make engaging in care an easier and less stigmatizing experience
Social Determinants of health and health behaviors	Key Informant Interview (Provider), Focus Group (Provider), Survey(PLWH, Provider)	Providing support groups, education, and utilizing peers to address factors associated with negative health outcomes, adherence aids, discussion of viral load with clients, use phone apps as medication reminder tools,

4

Summary of Challenges and Opportunities for Improvement

Challenge	Reported within	Opportunities for Improvement
Experience with Providers and Staff	Key Informant Interview (Provider), Focus Group (Provider),	Provider trainings (motivational interviewing, consumer health experience, confidentiality and welcoming)
Lack of coordination and follow-up	Key Informant Interview (Provider), Focus Group (Provider)	Wrap-around case management,
Stigma	Key Stakeholder Interviews (Black Women), Survey (Provider)	Public education, peer education, using social media, education about the impact of HIV on the community,

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Key Takeaways

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Conclusion

Questions?

Thank You!

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