



San Francisco Eligible Metropolitan Area 2012 Summary Report of HIV/AIDS Bureau's Quality Management Performance Measures

**HIV Health Services Planning Council
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Prepared By:

Celinda Cantú, Data Administrator, DPH-HHS

John Aynsley, Quality Management Coordinator, DPH-HHS

Reviewed By:

Bill Blum, Interim Director, DPH-HHS

Dean Goodwin, Administrator, DPH-HHS

Presentation Outline

- Update of Quality Management Program (QMP) Activities
 - QMP Concepts & Definitions
 - QMP Structure & Process
 - Training & Technical Assistance
 - On-going Improvement Activities
- Overview of Performance Indicators
 - Review 2012 EMA Summary Report Format
 - Discuss Data Collection Process
 - Address Data Limitations
 - Review Selected QM Indicators
 - Summary Conclusions
- Questions & Answers

SFEMA Quality Management Program – Concepts & Definitions

- Quality Assurance (QA) consists of measuring compliance to minimum quality standards and pinpoints specific problems to be resolved.
- Continuous Quality Improvement (CQI) is the continuous modification of a process or system to improve outcomes for everyone involved.
- A performance measure or indicator is a tool to assess specific aspects of care and services that are linked to better health outcomes while being consistent with current professional knowledge and meeting client needs.

SFEMA Quality Management Program - Goals

- Analyze Health Resource Service Administration's (HRSA) HIV/AIDS Bureau's (HAB) Clinical indicators across all three (3) counties.
- Maintain QM committee and quarterly meetings.
- Assess Individual Program QM processes and begin quarterly reviews of program level performance of QM indicators.

SFEMA Quality Management Program - Trainings

- Completed:
 - De-Escalation - (29 attended)
 - Transgender Best Practices (2 sessions with 63 attended)
 - Creating a Sustainable Business Model (10 attended)
 - Leveraging Resources (7 attended)
 - HIV Treatment Update (11 attended)
- Upcoming:
 - De-Escalation
 - Transgender Best Practices
 - HIV Quality Management

SFEMA Quality Management Program – Collaborative Activities

Care Collaboration:

- Regional QM Meeting with San Francisco Clinic Consortium
- Integrating HIV testing and linkage to care in primary care sites
- Engage in Enhanced Comprehensive HIV Prevention Planning process to improve local compliance toward National HIV/AIDS Strategy

Quality Management Program – Data Compliance Activities

- QMP focus of 2012: Increase data integrity
- ARIES Data Flow discussion with key providers
- ▶ Planned Activities:
 - HHS encourages and will assist agencies to apply to the State for electronic importation of client and service data.
 - About 60% of Primary Care Providers are electronically importing client and service data. This accounts for over 80% of the Primary Care UDC in SF.
 - Quarterly reports will be more reflective of programs quality of service

Quality Management Program – Performance Measures

- Selected from HRSA’s HAB HIV/AIDS Performance Measures for Adults and Adolescents – Outpatient Primary Care services. SF EMA performance indicators are:
 - Medical Visits
 - HAART
 - Viral Load Testing
 - Viral Load Suppression
 - Hep C
 - PCP Prophylaxis
 - Syphilis Screening

Quality Management Program – Summary Report Format (1 of 3)

- Introduction to SF EMA QMP
- Data collection process and parameters:
 - Data run on 9/17/2013.
 - Measurement period is 3/1/2012 – 2/28/2013.
 - The total unduplicated client count (UDC) for EMA Primary Care is 3,359 (N=3,359).
- Data aggregated into four groups:
 - Marin County
 - San Francisco County
 - San Mateo County
 - EMA-Wide

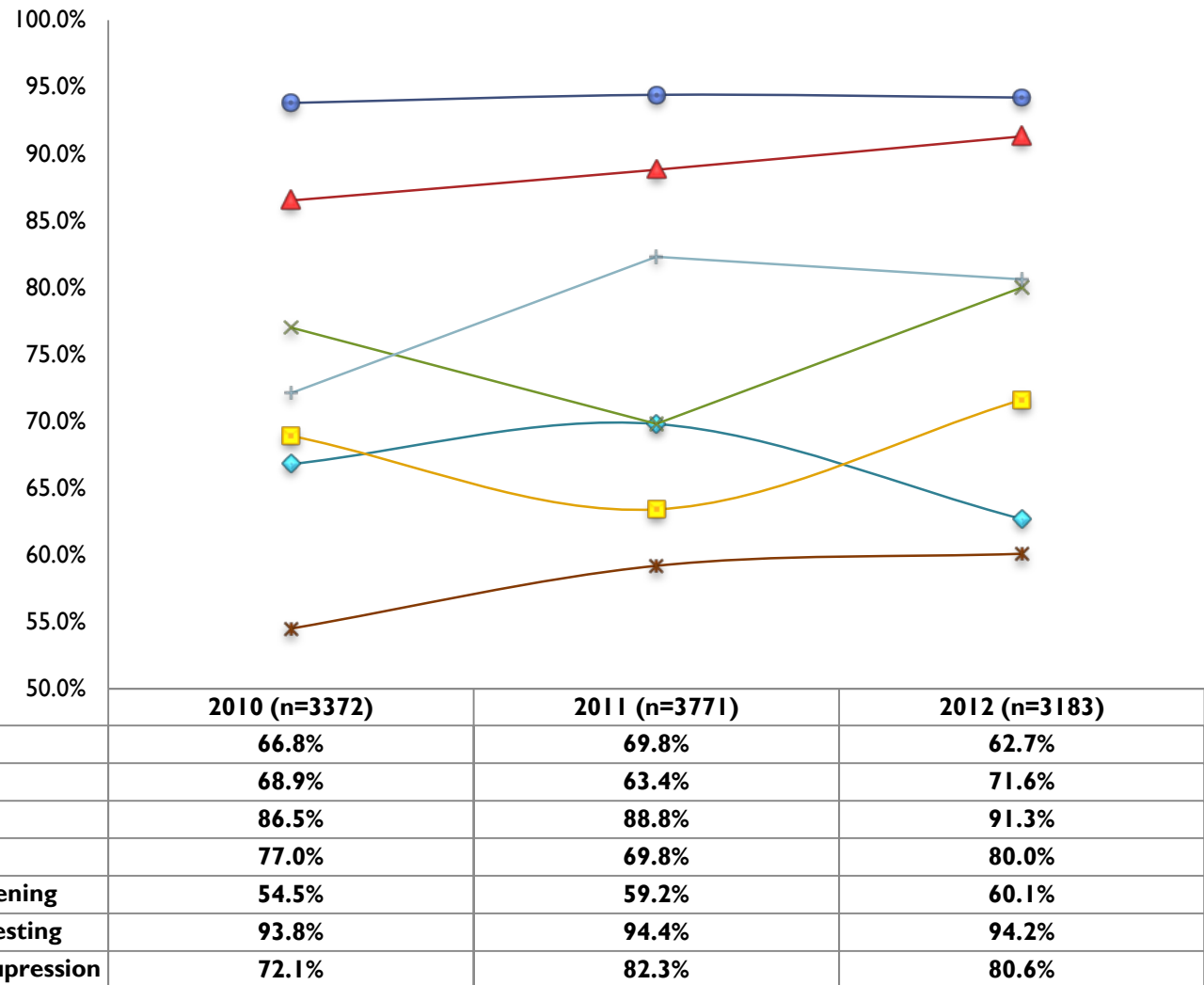
Quality Management Program – Summary Report Format (2 of 3)

- For each QM indicator:
 - Description of indicator including national and local threshold performance goals (when applicable).
 - Graphic depiction: The graph for each indicator measured illustrates the aggregate results in four groupings and includes local and national threshold value.
 - Analysis of data findings
 - Were performance goals met?
 - Reasons if not.
- All indicators were based upon a client receiving at least two Primary Care visit in 2012.
 - Client who met criteria 3,183 (n=3183) or 94.8% of EMA-Wide UDC.

Quality Management Program – Summary Report Format (3 of 3)

- **Data Perspective and Considerations**
 - This summary report is designed to address CQI thresholds not to compare models of care.
 - Primary Care service providers all conduct agency specific internal CQI activities with HIV-specific focused indicators which may be different from the indicators highlighted in this report.
 - Using the agency's primary database and subsequent data analysis of even the same indicators would render results very different than those derived through ARIES.
- **Definition, Analysis and Discussion of each Indicator**
- **2010-2012 SF EMA & 2008-2011 SF CoE Performance Indicators Summary Chart**
- **Conclusions and Next Steps for Improvement**

SF EMA Performance Indicators 2010 - 2012



Quality Management Program – Summary Report Conclusions

- HAART and Viral Load Testing indicators met or exceeded established thresholds.
- Hepatitis C Screening, Viral Load Suppression and PCP Prophylaxis nearly met established thresholds.
- Medical Visits and Syphilis Screening fell significantly below established thresholds.