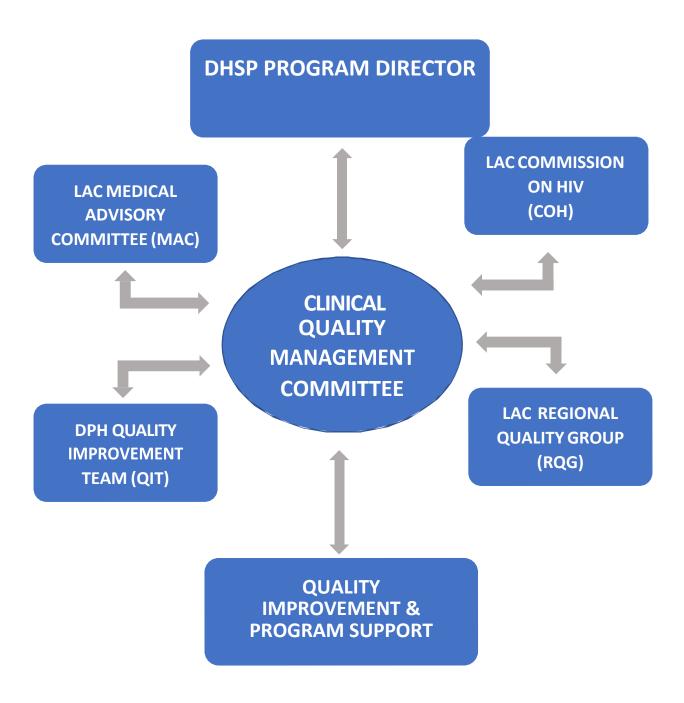
Division of HIV and STD Programs Clinical Quality Management (CQM) Program Oversight and Reporting Structure



Reviewed/Revised: 2.16.2021

Division of HIV and STD Programs Clinical Quality Management (CQM) Program RWP Yr. 30 Annual Quality Goals & Objectives

Goal 1: Develop, implement and maintain Clinical Quality Management Program infrastructure to monitor and improve the quality of services.

Obj. 1.1 Continue to convene a quality committee that meets at least quarterly to assist with the implementation of the RWP Part A CQM plan. Obj. 1.2 Finalize Yr 30 CQM plan and annual workplan. Obj. 1.3 Disseminate Yr 30 CQM plan and annual workplan to: 1) subrecipients, 2) planning council, 3) HIV consumers, and 4) DHSP staff. Obj. 1.4 Evaluate DHSP CQM plan (implementation of goals and objectives) and CQM program. Provide bi-annual RWP Clinical Quality Management (CQM) Program updates to HIV planning Obj. 1.5 council (LA County Commission on HIV (COH). Obj. 1.6 Provide bi-annual RWP Clinical Quality Management (CQM) Program updates to Regional Quality Group (RQG). Obj. 1.7 Provide bi-annual RWP Clinical Quality Management (CQM) Program updates to COH's

Goal 2: Increase stakeholder capacity to perform quality improvement activities.

Consumer Caucus.

- Obj. 2.1 Continue quarterly Regional Quality Group meetings to build QI capacity of RWP subrecipients.
- Obj. 2.2 Ensure QI training opportunities are shared with RWP subrecipients, HIV consumers and other stakeholders as appropriate.
- Obj. 2.3 Develop CQM Program Guidance to support sustained subrecipient CQM Programs.

Goal 3: Promote and foster continuous quality improvement initiatives across the EMA.

- Obj. 3.1 Identify and develop at least one QI initiative annually for the EMA.
- Obj. 3.2 Document and report progress on QI initiative(s) on a routine basis.
- Obj. 3.3 Engage stakeholders in EMA QI initiative(s) as appropriate.

Reviewed/Revised: 2.16.2021

County of Los Angeles Public Health – Division of HIV and STD Programs Clinical Quality Management (CQM) Program

Performance Measures

Table 1: RWP Performance Measures by Service Category

The CQM Committee has identified the following performance measures for the four prioritized services in accordance with HRSA's PCN 15-02.

Service Category	Measure	Yr 27	Yr 28	Yr 29 Q1 Mar-May	Yr 29 Q2 Jun-Aug	Yr 29 Q3 Sep-Nov	Yr 29 Q4 Dec-Feb	Yr 30 Q1 Mar-May	Yr 30 Q2 Jun-Aug
Medical Outpatient	Engaged in HIV Medical Care	99%	99%	99%	99%	100%	99%	99%	99%
(AOM)	Retained in HIV Medical Care	85%	86%	89%1	89%	90%	91%	81%	84%
	Viral Load Suppression	88%	90%	90%	90%	89%	90%	89%	90%
	Sustained Viral Load Suppression	67%	69%	72%	72%	73%	73%	66%	68%
Medical Case Management	Engaged in HIV Medical Care	95%	93%	95%	96%	96%	96%	93%	93%
(MCC)	Retained in HIV Medical Care	76%	73%	74%	76%	74%	73%	66%	67%
	Viral Load Suppression	77%	76%	76%	77%	76%	76%	74%	76%
	Sustained Viral Load Suppression	51%	49%	47%	49%	49%	47%	44%	46%
Oral Health Overall (General &	Periodontal Screening & Treatment	39%	38%	43%	42%	44%	38%	23%	39%
Specialty)	Oral Health Education	66%	72%	65%	62%	67%	63%	47%	63%
	Viral Load Suppression	92%	91%	92%	91%	91%	92%	93%	94%
	Sustained Viral Load Suppression	78%	78%	80%	79%	79%	79%	78%	78%
Benefit Specialty (Non-Medical	Engaged in HIV Medical Care	98%	97%	98%	97%	98%	99%	98%	98%
Case	Retained in HIV Medical Care	84%	84%	83%	85%	84%	83%	78%	80%
Management)	Viral Load Suppression	88%	86%	87%	86%	87%	87%	88%	90%
	Sustained Viral Load Suppression	67%	67%	66%	68%	69%	68%	65%	66%
Data Pull Date(s)	HIV Casewatch as of:	7/6/2018	4/2/2019	12/2/2019	12/2/2019	5/5/2020	5/5/2020	8/2/2020	11/2/2020
	Surveillance Data as of:	11/12/2019	11/12/2019	11/12/2019	11/12/2019	5/12/2020	5/12/2020	8/5/2020	11/4/2020
Table Updated		1/9/20	1/9/20	2/12/20	2/12/20	11/16/20	11/16/20	11/16/20	2/16/2021

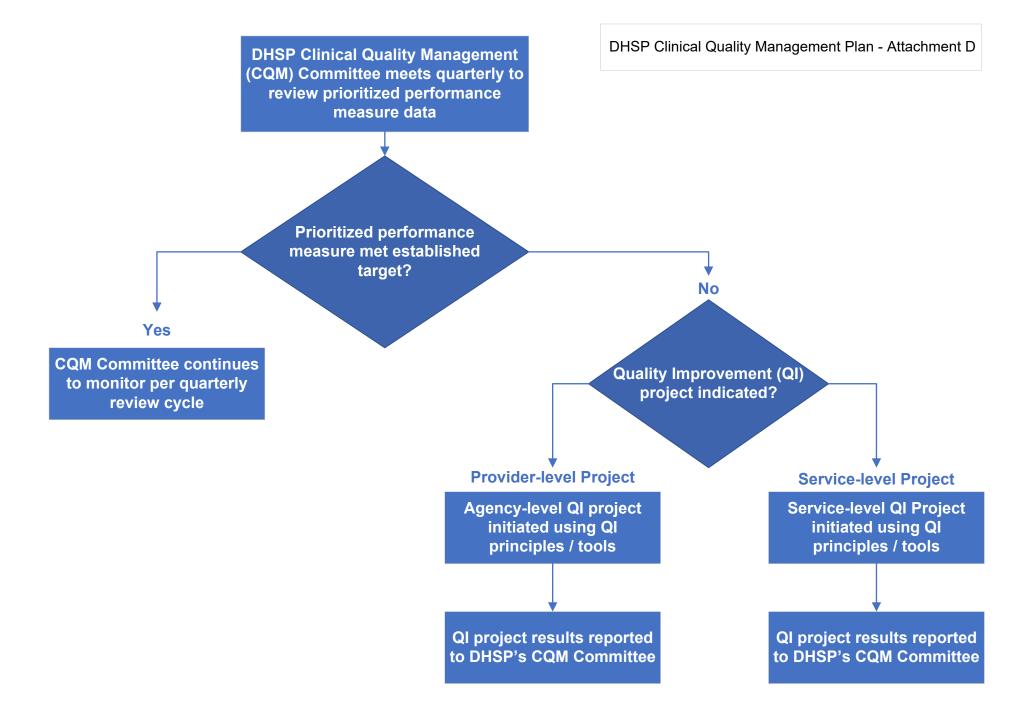
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Table 2: RWP Performance Measures Definitions

The measures were chosen to align with the HRSA HIV/AIDS Bureau (HAB) recommendations and expectations as well as the goals of the Los Angeles County (LAC) HIV/AIDS Strategy (LACHAS) and the Ending the HIV Epidemic (EHE) plan.

Measure	Definition	Data Source	Target
Engaged in HIV Medical Care	Percentage of clients with at least one CD4/VL/Genotype test during the measurement period.	CW / Surveillance	90% (Yr 28)
Retained in HIV Medical Care	Percentage of clients with at least two CD4/VL/Genotype tests at least 91 days apart during the measurement period.	CW / Surveillance	90% (Yr 28)
Viral Load (VL) Suppression	Percentage of clients with an HIV VL < 200 copies/ml at last test during the measurement period.	CW / Surveillance	90% (Yr 28)
Sustained Viral Load (VL) Suppression	Percentage of clients with an HIV VL of < 200 copies/ml at all tests during the measurement period.	CW / Surveillance	73% (Yr 28)
Received Periodontal Services (HRSA)	Percentage of OH clients who had a periodontal screening, examination or treatment at least once in the measurement period.	CW	90% (Yr 28)
Received Oral Health Education (HRSA)	Percentage of OH clients who received oral health education at least one in the measurement period.	CW	90% (Yr 28)

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Division of HIV and STD Programs Clinical Quality Management (CQM) Program Annual Quality Goals and Objectives Implementation Workplan RWP Yr. 30

Goals/Obj.	Activities	Lead	Mar	Apr	May	June	July	Aug	Sept	Oct	Nov	Dec	Jan	Feb	Yr. 30 Eval	Yr. 31 Workplan (Keep/Modify/Abandon)
Goal #1	Develop, implement and maintain a Clinical Quality Management (CQM) Program to monitor and improve the quality of services.															
Obj. 1.1	Convene Clinical Quality Management (CQM) committee that meets at least quarterly to assist with the implementation of the CQM plan.	1,2			x			X			X			X	Unmet; d/t COVID pandemic	Keep
Obj. 1.2	Finalize Yr. 30 CQM plan and annual workplan.	1,2	X												Met	Modify
Obj. 1.3	Disseminate Yr. 30 CQM plan and annual workplan to: subrecipients, planning council, HIV consumers, and DHSP staff.	1,2		х											Met	Modify
Obj. 1.4	Annually evaluate DHSP CQM plan (implementation of goals and objectives) and CQM program.	1,2												x	Met	Keep
Obj. 1.5	Provide bi-annual RWP CQM Program updates to HIV planning council.	1,2			х						х				Met	Keep
Obj. 1.6	Provide bi-annual RWP CQM Program updates to Regional Quality Group (RQG).	1,2		х						x					Met	Keep
Obj. 1.7	Provide bi-annual RWP CQM Program updates to the Consumer Caucus.	1,2				х						х			Unmet; 1 update provided	Keep
Goal #2	Increase stakeholder capacity to perform quali	ty impro	veme	nt act	ivities	•	<u>'</u>				,	1				

DHSP Clinical Quality Management Plan - Attachment E

Goals/Obj.	Activities	Lead	Mar	Apr	May	June	July	Aug	Sept	Oct	Nov	Dec		Feb	Yr. 30 Eval	Yr. 31 Workplan (Keep/Modify/Abandon)
Obj. 2.1	Continue quarterly Regional Quality Group meetings to build QI capacity of RWP subrecipients.	2	x			х			x			x			Met; 3/4 meetings held	Keep
Obj. 2.2	Ensure QI training opportunities are shared with RWP subrecipients, HIV consumers and other stakeholders as appropriate. Congoing as available of the stakeholders are shared with the stakeholders a										Met	Keep				
Obj. 2.3	Develop CQM Program Guidance to support sustained subrecipient CQM Programs.	2,4												X	Unmet; On hold	Кеер
Goal #3	Promote and foster continuous quality improvement initiatives across the EMA.															
Obj. 3.1	Identify and develop at least one QI initiative annually for the EMA.	1,2,3,4	x												Met; MCC Collaborative	Keep
Obj. 3.2	Document and report progress on QI initiative(s) on a routine basis.	1,2			x			X			x			X	Met	Keep
Obj. 3.3	Engage stakeholders in EMA QI initiative(s) as appropriate.	1,2,3,4	x												Met	Keep
2 = Quality 3 = Progra	Lead(s): 1 = Clinical Quality Management Committee 2 = Quality Improvement and Program Support (QIPS) unit 3 = Program Development and Research (PDR) unit 4 = Contracted Community Services (CCS) unit															