Santa Cruz County Health Services Agency Quality Management Minutes

6-19-19

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Topic	Discussion/Recommendations	Action	Responsib le Party	Follow- up Date		
Welcom e and Intro.	Robin convened the meeting of the Quality Management Committee by welcoming attendees.	None	N/A	N/A		
Attendees:	Marion Jordan, Robin Stone, Serena Mohammad, Socorro Gutierrez, Jennifer Herrera, Tyler Evans, MD	None	N/A	N/A		
Guests:	Sharon Polak, Elaine Nast, Raquel Ruiz					
	Agenda Items					
HIV Program Update						
from 3/20 & 4/17/19	Minutes were approved	None				
Announcements	The time of the QM Meeting will change to every 3 rd Wed from 3-4:30 to accommodate Dr. Evans. The location will be the same.					
Follow up on Action Items from 3/20/19 meeting	 Care Team case managers have been instructed to enter the primary case manager in EPIC under CARE Teams/HIV Case Manager. A sub team was identified to work on data discrepancies and definition changes. Marion, Robin, Sharon, Serena and Tyler have agreed to participate. The group will meet the 2nd and 4th Wed of the month from 3-4 PM. 	None Robin will invite Rachel, secure a location and send out invites.	Robin	Next meeting 7/17/19		
Follow up on Site Review as it relates to QM	Assuring representation from CARE Team and leadership- Dr. Evans, and Jennifer Herrera will be participating in the committee. Raquel Ruiz is in attendance currently. Elaine Nast from the CARE Team is currently participating. Data Discrepancies- QM Data team being formed. Declining # of patients, both new and established Consumer Input- See below	CARE Team to establish parameters for ongoing representation.	-Eliko and Socorro			
HIV System of Care	Update regarding HIV Stakeholder Meeting- Jennifer Discussed community wide stakeholder group utilizing the continuum of care to thoughtfully develop an HIV system of care in the community, and determine who is willing and best suited to take ownership of certain aspects of the continuum. A linkage specialist and a need to increase testing in the community were identified gaps.	John Leopold has been outreached and the question was raised re inviting Dr. Evans to participate.				
Data	Clinic QM Measures 4/1/18-3/31/19- 1. Data Sub team to address discrepancies and definition clarifications.	All to be discussed with data sub team.				

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	 Discussed measuring anal paps. Dr. Evans brought up the possibility of purchasing an HRA (which costs \$7-10,000). This could close the loop in doing anal paps. If we had the HRA, he thinks that someone from UCSF can provide a training. Substance Abuse Screening and follow up intervention-JMAC still working on clinic wide per Raquel. Per Marion, the MA's enter the info and the provider statement of review is the weak link. Hep B vaccine def is now 2 vaccines in 12 mo instead of 3 in 8 mo. Hep A screening and vaccine need to be delineated. STD screening shows a 93 % rate of patients meeting criteria, but data has only been using RPR's. Need to screen for annual GC/Chlam, which did not do well on HRSA chart review. Robin asked whether we want to add oral exam and HIV transmission counseling measures, since they did not do well on HRSSA chart review. QM Measures Requested by HRSA- Marion and Robin did a manual audit of the PCP prophylaxis and New in Care for the past 3 years. There was a discrepancy between the PCP prophy data from the CQI measures report and the manual audit. Also, on the new in care report, the manual audit showed that there were patients listed who are part of OCHIN, but have never been or are not currently clinic patients. We need to figure out how to get better data on New in Care. 			
Consumer Input	Consumer Meeting from 4/17- See minutes and notes on consumer feedback. Consumer panel at HRSA Site Visit- Reviewed main points: Watsonville site does not have enough provider coverage medications-change in mail order pharmacy has been	There are to be consumer forums every 4 months. The next one should take place in Aug, 2019. Identify	Socorro to take the lead in the consumer forums. Robin to assist.	

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	problematic, transportation issues, access to appts if missed or need to be re-scheduled. Should a different contact other than the front desk be provided to help get patients in sooner?	consumers who can help with next survey. Survey to integrate feedback on clinic and CARE Team. Consumer group can be fluid. Feedback regarding consumer input is welcome. OK to contact Robin directly or by email.		
PDSA	Retention to Care PDSA- Ongoing q 6 mo. Non clinic patients were filtered out in first PDSA (Oct, 2018), which we mostly fixed. This time there were only 2 patients filtered. One receives his primary care at the clinic, and gets MAT and behavioral health support. He receives his HIV care at PAMF, so he is being counted in our data. After doing the original 10/18 PDSA, a decision was made to prioritize patients who did not have a vl or HIV provider visit in the past 12 mo. A question was raised re whether we need to outreach patients who did not meet the q 6 mo criteria.	Will look at MAT patient filtering in sub team. Will continue to evaluate our priorities and capacity for outreach.		
	Next PDSA- Annual screening panel is up and running. Includes GC/Chlam, TB, U/A, Lipids in addition to standard lymphocyte, VL, CMP and CBC. Will include all added tests on PDSA to see if outcomes improve with use of annual screening panel.	Marion and Robin to take the lead on new PDSA. Dr. Evans to help with getting other providers on board with using annual screening panel.		

Date Minutes Accepted: July 17, 2019

NEXT MEETING: July 17, 2019 from 3:00-4:30 PM; 1080 Emeline DOC Conference Room