



Evaluation and Assessment Committee Meeting

February 11, 2015

Planned Parenthood

2430 Poplar Avenue St. 100

3:30 PM

Attendance	Committee Members	Attendance	Committee Members
P	Melissa Wright*	P	Christopher Mathews
P	Lisa Brisendine	A	Elise McNutt
A	Lee Goins	P	Wendell Wainwright
P	Henry Jay Johnson	A	Sheila Williams
A	Marilyn Lyles		

*Denotes Chair

A=Absent

P=Present

T=Telephone

Others Present: Nycole Alston, Steve Overman, Jennifer Pepper, Jimmie Samuels, Fatimah Stout

I. Call to Order

The meeting was called to order at 3:35 PM by Melissa Wright.

II. Statement of Confidentiality/Conflict of Interest

Everyone was reminded of the Statement of Confidentiality and Conflict of Interest policy. No Committee members had any new conflicts of interest to disclose.

III. Welcome/ Introductions/ Moment of Silence and Remembrance

Everyone was welcomed to the meeting and a moment of silence and remembrance was observed.

IV. Roll Call

Melissa Wright called roll and there was a quorum present in order to conduct business.

V. Approval of Agenda

Wendell Wainwright moved to accept the agenda. Lisa Brisendine seconded the motion. The motion carried.

VI. Approval of Minutes (attached)

Wendell Wainwright moved to approve January 14th minutes. Jimmie Samuels seconded the motion. The motion carried.

I. Old Business

No old business.

II. New Business

a. Committee Work Plan (attached)

Nycole Alston, Planning Group Manager, discussed a draft of the committee work plan.

- o Nycole added the updated dates according to the upcoming grant year.
- o At the H-CAP meeting, the grantee shared with the body recording dates developed within the grantee office.
- o This committee will be responsible for In+Care measures, performance measures that are submitted to the Mayor, and updates from the Quality Management committee.

- Evaluation around Prevention efforts has been added.
- Looking at the manuals provided for the Planning Group through the CDC, Nycole developed a few things the committee can evaluate under Section 1 on the first page, D:
 - Evaluate the effectiveness of the Prevention Lead Agent
 - i. Conducting a request for proposal process
 - ii. Targeting interventions to populations at high risk for HIV
 - iii. Providing guidance and support to build local capacity
 - iv. Reporting information to community
- Changes can be made as needed when the time comes to develop assessment for Prevention providers.
- Jennifer Pepper, Program and Quality Manager, suggested developing some qualitative assessment for the Prevention Intervention and make sure provider representation is in the room.
- Nycole suggested looking at the work plan in April.
- Christopher Mathews suggested since the committee will be using the Administrative Mechanism to access Prevention, add develop qualitative measures to evaluate prevention interventions in April as well.
- Developed qualitative measure to evaluate prevention interventions is an activity that will begin in April and Nycole will begin reviewing it with the Evaluation & Assessment Committee during the March meeting in order to identify providers to include.
- Jennifer suggested it would be a good idea if providers give a short brief, presentation on measures they are already examining and then go from there.
- Nycole challenged the committee to think of questions to further engage services provided by Ryan White Program providers.
- Jennifer suggested doing a focus group with the survey and having a facilitator.
- Chris suggested after all bodies have reviewed the performance measures, use that information to make changes to the Standards of Care.
- Nycole suggested reviewing a Standard of Care once a month; the committee suggested putting it in the work plan.
- Nycole stated she will put it down as a task item to review monthly starting with the older Standards of Care.
- Chris asked if the committee can review the data when reviewing each Standard.
- Jennifer stated the Grantee can provide the data the committee would like to see.
- Jennifer stated the Grantee can send out a notice to all outpatient providers informing them the Evaluation & Assessment committee is reviewing their Standards of Care and if they are interested in providing input to please join the committee at their next meeting.
- The committee wanted to begin with Outpatient Ambulatory Standards of Care.
- Jennifer will have Sulaiman Aizezi, Epidemiologist, re-run the unmet need number for the review of Outpatient Ambulatory Standards of Care.
- Steve will provide the consensus by provider for the Outpatient Ambulatory Standards of Care.
- Jennifer mentioned to the committee on Friday the grantee will do a webinar to review the EFA change and all the EFA providers will be required to have at least one representative and there will be one done for the Food Bank also.
- The webinar will be recorded and hopefully it can be archived in the provider only section of the website.
- Nycole will go through the work plan, make the necessary changes, and send them out prior to the next meeting so they can be reviewed.

b. Performance Measures (attached)

Steve Overman, Data Analyst, did an overview on the Performance Measures.

- In reference to the TGA-wide PMs, Core 1 viral suppression has been decreasing since September.
- Currently in Core 1 viral suppression Core Performance Measures is at 66%.
- For Core 5: PCP Prophylaxis, has been decreasing.

c. In+Care Measures (attached)

Steve Overman did an overview of the In+Care Measures.

- InCare 1, 2, and 3 is doing better than the Ryan White Program on a national average.
- InCare 4: Viral load suppression is 10% lower than national average through Ryan White Part A providers.
- There is currently training with adherence and the Grantee will be looking at the specific sub-groups that make up the client's health to see if there is a specific sub-group affected more profoundly without having viral suppression.
- Lisa Brisendine stated she has witnessed within a survey that the majority of the clients that are not viral suppressed are the ones who are homeless, choose not to take medication, or have mental health issues.
- Melissa stated she observed patients with Medicare were the ones who had a higher viral load. Most of the Medicare patients who didn't qualify for extra help co-payments for particular medicine ran up to \$1,000.
- Due to open enrollment in the State of Tennessee Medicare patients now can be placed on IAP and their co-payments will be covered.
- Melissa stated there are currently 15 patients signed up and they all have high viral loads.
- Jennifer stated the First Response Center in Nashville has a good viral suppression rate and she suggested having their Program Coordinator to visit the Grantee and give feedback on what they have found to be successful.
- Jennifer stated the Grantee is encouraging Quality Management committee to focus on a group that isn't doing well, and look at ways to make improvements.
- Steve stated the Grantee is working to get data on clients that are not identified in CAREWare to see if they had any labs done in the State of Tennessee. Once this information is submitted into CAREWare, it can be given to providers for targeting interventions.
- Nycole suggested looking at Respite Care and Home Health Care standards to possibly put funding into services for those individuals needing the assistance. Jennifer stated she will look at the service definitions and provide an update.

d. Agenda Items for next meeting

- GY15 Committee work plan
- Outpatient Ambulatory Standards of Care
- Assessment of the Administrative Mechanism questions

III. Other Business

Jimmie Samuels got an opportunity to go to Arkansas for National Black HIV/AIDS Day on Saturday February 7th.

IV. Announcements

No announcements.

V. Adjournment

Meeting adjourned at 4:37PM.

Next Meeting: March 11th at 3:30PM, Planned Parenthood, (2430 Poplar Ave).

Melissa Wright, Committee Chair

Date Approved

Nycole Alston, Planning Group Manager

Date