

MEMPHIS TGA
QUALITY MANAGEMENT COMMITTEE
MAY 7, 2015
COMMUNITY FOUNDATION

Meeting was called to order at 11:35 a.m. Quorum was established.

Members Present: Sulaiman Aizezi, Becky Bayless, Lisa Brisendine, Ellyn Daniel, Venus Jordan, Kenneth Lewis, Steve Overman, Jennifer Pepper, Jamie Russell-Bell, Jimmie Samuels, Maria Sutton, Andrea Vincent, Mardrey Wade

Members Absent: Nycole Alston, Karen Connolly, Donna Freeman, Dr. Aditya Gaur, Melissa Wright, Dorcas Young-Griffin

Others Present: Sylvia Hobbs

I. Welcome and Introductions

Jennifer Pepper welcomed everyone to the meeting.

II. Review of 02/05/2015 Minutes

Minutes were reviewed and accepted with no correction (s).

III. Update on Part B QM Plan – Maria Sutton

- Continuous working on the draft for the Quality Management Plan
- At the State Wide Meeting in March, Dan Sendzik, Coach of the National Quality Center gave a training on quality management to help enhance quality management services.
- Christopher Walton is the new AIDS Drug Assistance Program (ADAP) Coordinator for the Tennessee Department of Health in Nashville, TN.

IV. Update on Part D QM – Andrea Vincent

- Continuous working on the Quality Improvement Plan
- Annual site visits for sub-recipients are scheduled for June 2015
- Case Managers are conducting home visits and following up with potential clients that are out of care
- Follow-up phone calls with clients are taking place to ensure all are satisfied and needs are being met
- A meeting is scheduled with Dan Sendzik to discuss our QM/Improvement Plan
- The next Quality Management meeting will be in June or July

V. Review HAB Performance Measures – Steve Overman

- Steve gave an overview of the HAB Performance Measures. Improvements were made in all four core categories. Core 04: Gap in Medical Visits percentage was down. Copies of the measures were distributed at the meeting.

VI. Review of In+Care Campaign Measures – Steve Overman

- Steve gave an overview of the In+Care Campaign measures. All measures (except viral load) were within the National Standards Measures. Copies of the measures were distributed at the meeting.

VII. Results From The 2014 Client Satisfaction Survey – Steve Overman

- Steve gave a PowerPoint presentation of the “Client Satisfactory Survey”. The results were (Report Card Grades: A – F):
 - Medical Services - B
 - Case Management – B
 - Support Services – B

VIII. Review of Baseline Data For Non-Medical Performance Measures– Steve Overman

- At the last meeting, the committee finalized and approved non-medical measures. Steve is in the process of creating those measures in CAREWare. However, there are still some measures the committee will need to review and discuss. Training on standard ways of entering data will have to be performed as well.
- Steve suggested that providers make sure to document in CAREWare any data regarding viral load that is not transferred automatically from the providers’ electronic medical records.
- 3.1 Annual Substance Use Treatment Plan was not completed in CAREWare due to lack of a subservice in CAREWare as referenced in the performance measure.
- At the next meeting, Steve will:
 - Provide the committee with baselines of performance measures that have been discussed that can be created and recommendations for performance measures that cannot be captured with CAREWare as-is.
 - Provide CAREWare entries needed to capture consumer as numerators and denominators in performance measures.

IX. Review of Consumer Comment Cards – Mardrey Wade

- Hope House returned six (6) comment cards
- Mardrey encouraged providers to place their comment box in a location where clients will feel comfortable completing the card.

X. Update on 2014-2015 QM Plan Progress - Committee

- The 2014-15 QM Plan Progress was outlined in the Agenda (updates on plans that were: (a) completed, (b) in progress and (c) continuous).

Next Meeting: August 6, 2015 at 11:30am, Community Foundation, 1900 Union Ave