



**MEMPHIS TGA
QUALITY MANAGEMENT COMMITTEE
May 5, 2016
Red Cross**

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

Members Present: Lisa Brisendine, Ellyn Daniel, Venus Jordan, Chuck Kolesar, Kenneth Lewis, Lauren McCann, Steve Overman, Jennifer Pepper, Jamie Russell-Bell, Jimmie Samuels, Maria Sutton, Mardrey Wade

Members Absent: Sulaiman Aizezi, Becky Bayless, Donna Freeman, Dr. Aditya Gaur,

Others Present: Jay Johnson, Jacquelyn Sawyer, Nicole Gottier, John N., Maria Randall, Tomekicia Wren, Sylvia Hobbs, Christina Underhill, Clarence Davis, MD, Marilyn Burress, Melanie Bradley, Michelle Anderson, Ester Kim

I. Welcome and Introductions

Chuck Kolesar welcomed everyone to the meeting and everyone participated in introduction.

II. Review of February 4, 2016 Minutes

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

III. Update on Part B QM Activities - Maria Sutton

- Kenneth Rourk is no longer with their program. Site visit schedules are being rescheduled.
- The State Quality Management Plan has been distributed. Contact Maria if you have not received a copy.
- The State Quality Management Group decided to focus on individuals that are co-infected with HIV and HEP C as their “Quality Improvement Project” for this year. A survey is being generated in Survey Monkey and will be sent to providers once it is completed.

IV. Update on Part D QM – Lauren McCann

- LeBonheur will be developing the following measures that will be very specific to our populations:
 - Re-engagement in primary care at the conclusion of postpartum care
 - No show rate

- Postpartum depression screenings
- A drug resistance testing before the initiation of ART
- Sara and Lauren will be implementing the Edinburgh postpartum depression screening with their clients
- Viral load suppression is still an ongoing issue. Plans are to develop a viral suppression project
- LeBonheur have identified psychosocial support as a common denominator for suppressed clients. Plans are to assess ways to help facilitate those clients.

V. Current Quality Improvement Projects:

Memphis Health Center (Improving Viral Supression) – Dr. Clarence Davis

- Memphis Health Center goals are:
 - To identify Ryan White clients not in compliance with Core Performance Measure #1
 - To provide intensive medication adherence counseling and reevaluation by the medical provider, who will make changes to regimens and clinical care plans

Copies of the Viral Load Suppression Action Plan were distributed.

Resurrection Health (Immunizations) – Dr. Easter Kim / Tomekicia Wren

- Resurrection Health created a “Flow Sheet” that will provide clients immunization records, notes and lab work. This information will be recorded and tallied at the end of the session (February thru May). A report will be provided at the next QM meeting.
- Consumer Input Committee – Jimmie Samuels
The committee is providing a survey on “Retention to Care” for consumers at Christ Community. A short survey will be available for clients to complete. The goal for this survey is to help empower consumers to advocate for themselves.

VI. Highlights of 2015 Comprehensive Needs Assessment – Charles Kolesar

Chuck presented a PowerPoint presentation comparing statistical rates and ranks of newly diagnosed HIV cases (incidence and prevalence rates), residents not covered by health insurance and continuum of care in the Memphis TGA and United States. This information is available on line at www.hivmemphis.org, under the subtitle “The 2015 Comprehensive Needs Assessment”.

VII. Review of HAB Performance Measures and New Thresholds – Steve Overman

HAB Performance Measures

Steve discussed the HAB Performance Measures. Copies of those measures were distributed at the meeting.

New Thresholds

Steve presented a PowerPoint presentation on Thresholds 2016-2020. The goal for “Thresholds” is to represent minimum levels of performance that a sub-recipient agency exhibits that keep on track to achieving larger, future goals within the Memphis TGA. Steve will email a Threshold Scenario Spreadsheet for providers to complete (blue shade only). Providers were asked to bring ideas for the increases in the four core PMS GY2017-18 and 2018-19 for discussion.

VIII. Community Announcement: None

Next Meeting: August 4th, location will be announced