

QUALITY MANAGEMENT (QM) MEETING

Date: Thursday, June 14, 2018 at 9:00 a.m.

Location: Christopher Hope Building, 1st Fl., 60 Temple St., Paterson, NJ

AGENDA ITEM	SUMMARY	Who	Open	Closed
Integrated Plan Crosswalk	<ul style="list-style-type: none"> ❖ A review of the Integrated Plan Crosswalk was completed – document that shows where QM’s plan links with the TGA’s Integrated Plan. ❖ Last month, QM and P&D finished a review of the progress of the Integrated Plan. The plan’s “kick-off” meeting was held on January 31, 2017 and a follow-up meeting will be coordinated with all stakeholders. We’ll invite everyone who participated, provide them with information about the plan’s progress and have discussions about further implementation and responsibilities of lead agencies as identified in the plan. 			
Action Items				
--Send crosswalk document to all		Admin		
--Webinar Training for Health Literacy Tool		ColRch		
--Locate the names of the people who attended on 1/31/17; they will be invited back		Admin		
Quality Improvement Projects	<ul style="list-style-type: none"> ❖ Members were asked to share current quality improvement projects taking place at their organizations, and talk about barriers and outcomes. ❖ A conversation was held regarding tobacco screening and cessation programs, the ability to track/document information and available modules. <ul style="list-style-type: none"> ○ HackensackUMC currently EPIC to gather tobacco cessation data. Dr. Mendez is satisfied with that system. ○ K. Walker asked if a hard copy of EPIC template could be used by all providers, and how that information will appear in e2 (non-medical case managers cannot access the “medical” tab). ❖ A discussion took place about assessing information on immunizations (HepA, HepB, Tdap, flu, HPV). Ryan White funds cover immunizations. ❖ M. Anderson brought up a question about oral health indicators; whether they were required and/or being analyzed. RDE had the results of the oral health indicators available and projected the information for review and discussion. Oral Health is a quality improvement indicators required for the grant application. 			
Action Items				
--Provide QM with HRSA immunizations requirements		ColRch		
--Follow up with ADDP about utilizing Ryan White funds for immunizations		DW		
--Remove ‘wellness’ and ‘mental health’ questions from oral health indicator		RDE		
--Revise Client Satisfaction Survey questions and review every 6 months		QM		
--Obtain from RDE information on what is tracked for QM’s review and modification		ColRch		
--Establish baselines for immunizations and smoking cessation to create goals		QM		



New Jersey Cross-Part Collaborative	❖ The results of the New Jersey Cross-Part Collaborative cohort study was displayed.				
Action Items			Who	Open	Closed
--Show comparative data between Bergen-Passaic TGA & NJ Cross-Part Collaborative			ColRch		
National Quality Center (NQC) and Cohort Studies	<ul style="list-style-type: none"> ❖ The former National Quality Center (NQC) is now known as HRSA's Ryan White HIV/AIDS Program Center for Quality Improvement and Innovation (CQII). ❖ The Project Extension for Community Health Outcomes (ECHO) Collaborative is a national initiative to reduce disparities, increase viral suppression and increase local quality improvement capacities in four disproportionately affected HIV subpopulations -- MSM of Color, African American and Latina Women, Transgender People, and Youth. The initiative is managed by the HRSA Ryan White HIV/AIDS Program CQII and was developed using the ECHO model and supported by the HRSA HIV/AIDS Bureau. ❖ The Bergen-Passaic QM committee intends to become aligned with national initiatives such as Project ECHO. The committee reviewed and discussed a data sheet, and viewed a video, and PowerPoint presentation on Project ECHO. 				
Action Items			Who	Open	Closed
--Send Project ECHO data sheet to QM			Admin		
Next Meeting	❖ July 12, 2018 at Crossroads Ministry Center, 511 East 22nd St., Paterson, NJ Start Time 9:00 a.m.				



MEETING MINUTES OF THE PLANNING & DEVELOPMENT (P&D) COMMITTEE

Date: Thursday, June 14, 2018 at 10:45 a.m.
Location: Christopher Hope Building, 1st Fl., 60 Temple St., Paterson, NJ

AGENDA ITEM	SUMMARY		
Moment of Silence	A moment of silence was observed for those affected by HIV/AIDS.		
Welcome	K. Walker called the meeting to order at 10:45 a.m., and welcomed everyone.		
Attendance	<p>Present</p> <ol style="list-style-type: none"> 1. K.Walker* 2. D. Wilson 3. I. Panagiotis 4. P. Zeno-Martinez* 5. R. Welsh* 6. M. Anderson* 7. E. Elizondo* 8. N. Kubisky* 9. R. Folger 10. K. Thirukandalau 11. Y. Guillen* 12. L. Ashe* 13. G. Kelly* 14. O. Pena* 15. A. Muñoz* 	<p>Recipient M. Izquierdo</p> <p>Guests</p> <p>Support Staff 16. T. Schucker 17. S. Gonzalez</p> <p>*P&D Committee Member</p>	<p>Absent</p> <ul style="list-style-type: none"> ▪ J. Dillard* ▪ K. Daniels* ▪ P. Cuffe* ▪ P. Moschella* ▪ B. Roman ▪ A. Blakney ▪ J.Guzman ▪ M. Day ▪ J.AhLee ▪ T. Smith ▪ L. Williams ▪ D. Mendez
Approval of Minutes	Motion: To accept the meeting minutes of May 10, 2018, motioned by N. Kubisky, seconded by G. Kelly. A vote took place after discussing edits and/or corrections and a review of the action items. Vote: 7-Yes, 0-No		
PCAT	A review of the Planning Council Action Timeline took place. P&D committee is on track.		
Open Discussion	❖ J. Daniel read and discussed the grant application guidance and narrative. He also showed the language currently being drafted in the TGA's grant application.		
HRSA Summary Statement	<p>❖ The grant application score was 95 out of a possible 100 (it was 92 last year). The funds received were \$34,000 less than last year. P&D reviewed and discussed the HRSA/HAB Objective Review Committee (ORC) Final Summary Statement which outlines the application's strengths and weakness.</p> <p>❖ 'Attachment 3' of the grant application was displayed -- demographic table of the TGA's incidence and prevalence. The time for 2017 data request is now.</p> <p><u>Note</u></p> <ul style="list-style-type: none"> ▪ A person is counted in state they were tested/diagnosed, not where they are currently being treated. 		



<p>HIV Integrated Prevention and Care Plan 2017-2021</p>	<ul style="list-style-type: none"> ❖ Now that the review of the Integrated Plan was done, the plan will be prepared for redistribution. ❖ A follow-up meeting will be coordinated (to occur after 9/21 but before 12/31) with all stakeholders involved for 'part two' of the Integrated Plan. Everyone who participated in the January 2017 kick-off meeting in will be invited back. <ul style="list-style-type: none"> ○ Invitation to include: cover letter, the plan along with updated implementation progress, and requests for additional updates, barriers and challenges. Stakeholders will be asked to come prepared to discuss their role in depth. ○ We also must formally collecting the demographic data of all participants. 			
<p>Action Items</p>		<p>Who</p>	<p>Open</p>	<p>Closed</p>
<p>--Send the high-level overview of the status of the Integrated Plan (PowerPoint)</p>		<p>Admin</p>		<p>X</p>
<p>--Send final version of Integrated Plan to P&D and Planning Council</p>		<p>Admin</p>		<p>X</p>
<p>Service Standards</p>	<p>The committee <u>reviewed, discussed and approved</u> the following Service Standards:</p> <p><u>Food Bank - Notes</u></p> <ul style="list-style-type: none"> ▪ Food banks over-utilized and running low. ▪ The idea of possibly partnering with a nutritionist/dietitian (who is experienced in HIV) was mentioned for a Medical Nutrition Therapy pilot program, however, any new service category would have to go out for open bid. P&D could make the recommendation during PSRA. <ul style="list-style-type: none"> ○ Program would aim to meet special dietary needs of individuals. ○ One example is the food bank monitoring tool used in Texas. ○ Primary care doctor would have to make a referral based on a medical diagnosis. ▪ There are currently 4 food voucher providers under HOPWA. ▪ A nutritionist would have access to lab/blood work, could oversee/approve menu and food selections (and restrictions) and work with HOPWA's voucher program. <p><u>Medical Transportation – Notes</u></p> <ul style="list-style-type: none"> ▪ TGA uses a van service to transport consumers to/from appointments related to core services only. <p><u>Early Intervention Services (EIS) – Notes</u></p> <p>This Service Standard was put on hold. M. Izquierdo (Recipient) and Collaborative Research will work on finding the best direction and approach for EIS in relationship to the 'Outreach' service standard.</p>			
<p>Action Items</p>		<p>Who</p>	<p>Open</p>	<p>Closed</p>
<p>--Discuss recommending a nutritionist and "Medical Nutrition Therapy"</p>		<p>P&D</p>		<p>X</p>
<p>--Send the Service Standards to planning council for review and approval</p>		<p>Admin</p>		<p>X</p>
<p>Old Business</p>	<p>None</p>			



New Business	None
Adjournment	<p>The meeting adjourned at 12:24 p.m. with a unanimous vote.</p> <p>Next Meeting Thursday, July 12, 2018 at Crossroads Ministry Center, 511 East 22nd St., Paterson, NJ Start Time 10:45 a.m.</p>

OPEN ACTION ITEMS FROM THE MONTH OF MAY	Who	Open	Closed
-Implement Health Literacy Tool	MI/ColRch	X	
-Revisit Cultural Competency Recommendations	MI/e2	X	
-Create Resource Inventory List	RW	X	
-Mention achievements of the Integrated Plan at each Planning Council meeting	KW	X	
-Finish Service Standards	P&D	X	