

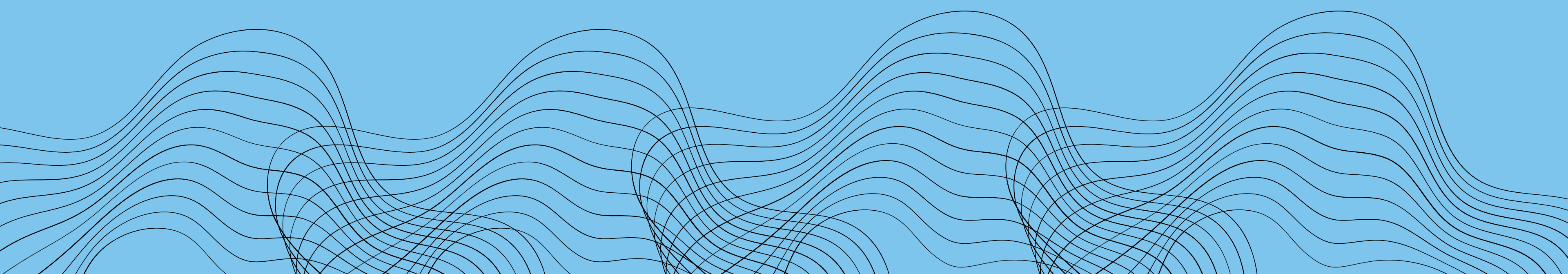
THE CQM PROGRAM & MODEL FOR IMPROVEMENT (MFI)

JUNE 29, 2023 | JESSICA RIOS



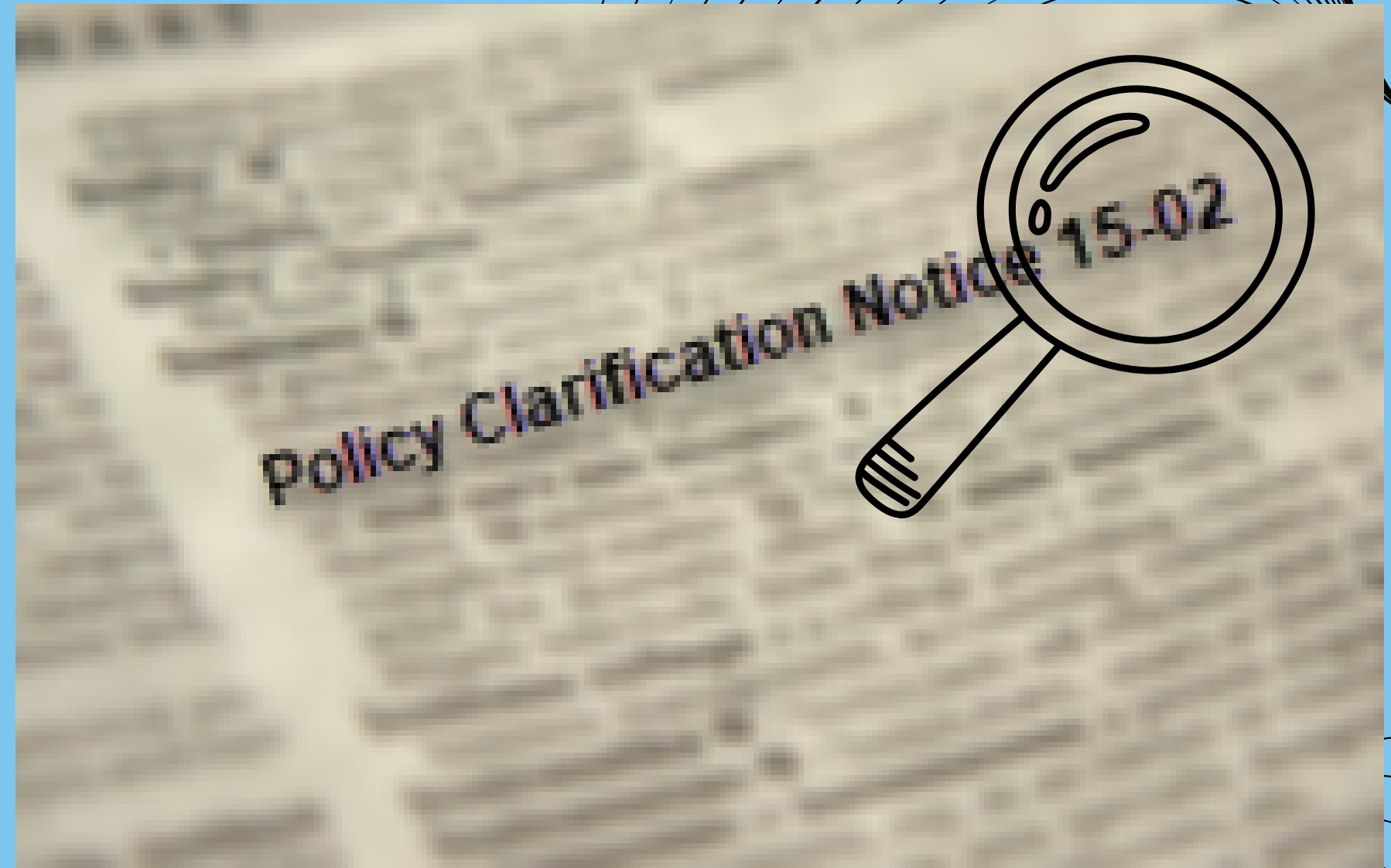
LAS VEGAS TGA
PART A HIV/AIDS PROGRAM
CLARK | MOHAVE | NYE COUNTIES

Learning Objectives

- Define HRSA HIV AIDS Bureau's (HAB) Policy Clarification Notice (PCN) 15-02's purpose
 - Identify the three buckets comprising Clinical Quality Management
 - Know what is Quality Improvement
 - List the steps of the Model for Improvement (MFI)?
 - Develop an AIM Statement
 - Understand how to apply the MFI to a Quality Improvement project
- 

Definition

PCN-15-02 operationalizes the expectations for a Clinical Quality Management program required by all agencies funded with Ryan White dollars.



Clinical Quality Management (CQM)

CQM is:

- Building Quality Management and improvement specific infrastructure
- Performance Measurement for QI
- Quality Improvement projects

CQM is not:

- Grant Administration
- Quality Assurance
- Monitoring and Evaluation of subrecipients programmatic and fiscal performance
- Data reporting and integration

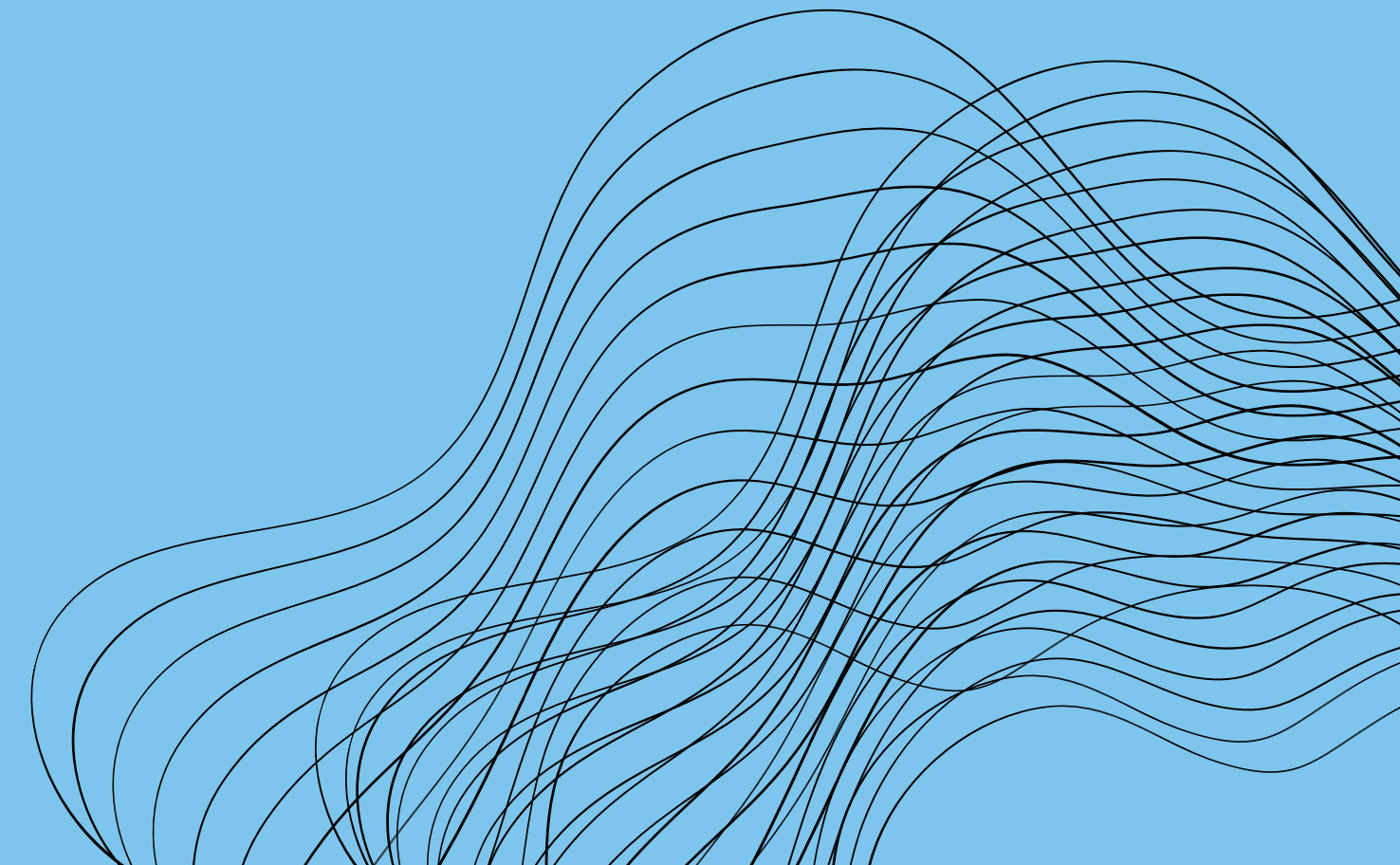


The 'Quality Program'

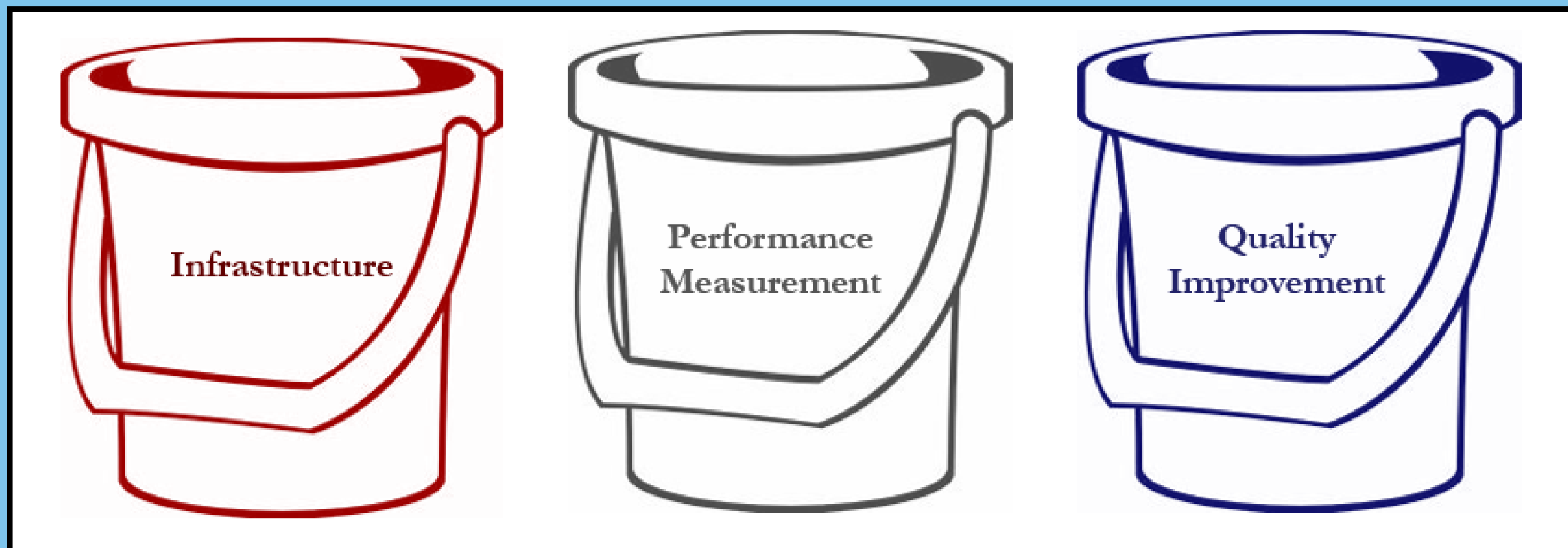
HIV/AIDS Bureau's term = Clinical Quality Management (CQM) program

At a minimum, the clinical quality management program:

- Is composed of a multi-disciplinary team
- Uses quality improvement teams to execute quality improvement projects
- Writes an agency-wide quality management plan
- Establishes performance measures



There are 3 "Buckets" to CQM



What is Quality Improvement?

There is no one, “best” definition of quality improvement in healthcare. The Robert Wood Johnson Foundation defines quality improvement as...

“The process-based, data-driven approach to improving the quality of a product or service. It operates under the belief that there is always room for improving operations, processes, and activities to increase quality.”



What is Quality Improvement?

HRSA provides the following definition of QI:

Quality improvement (QI) consists of systematic and continuous actions that lead to measurable improvement in health care services and the health status of targeted patient groups.

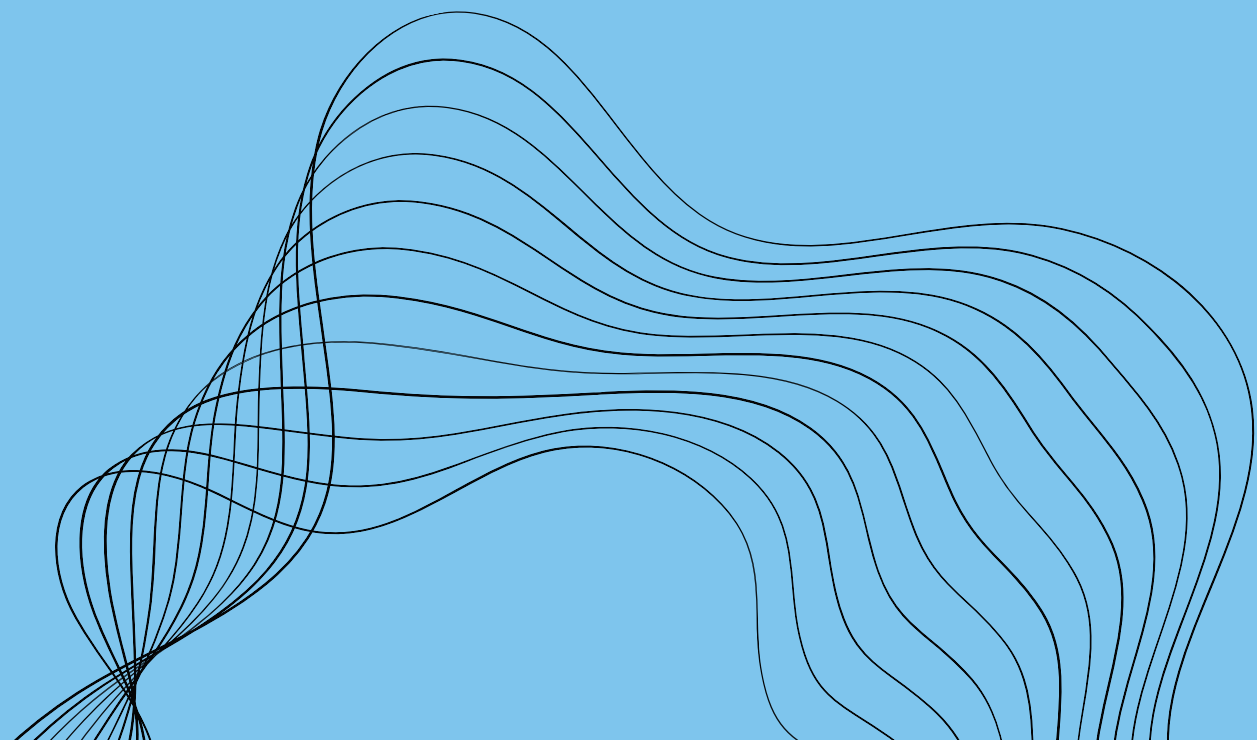


Key Quality Improvement Concepts

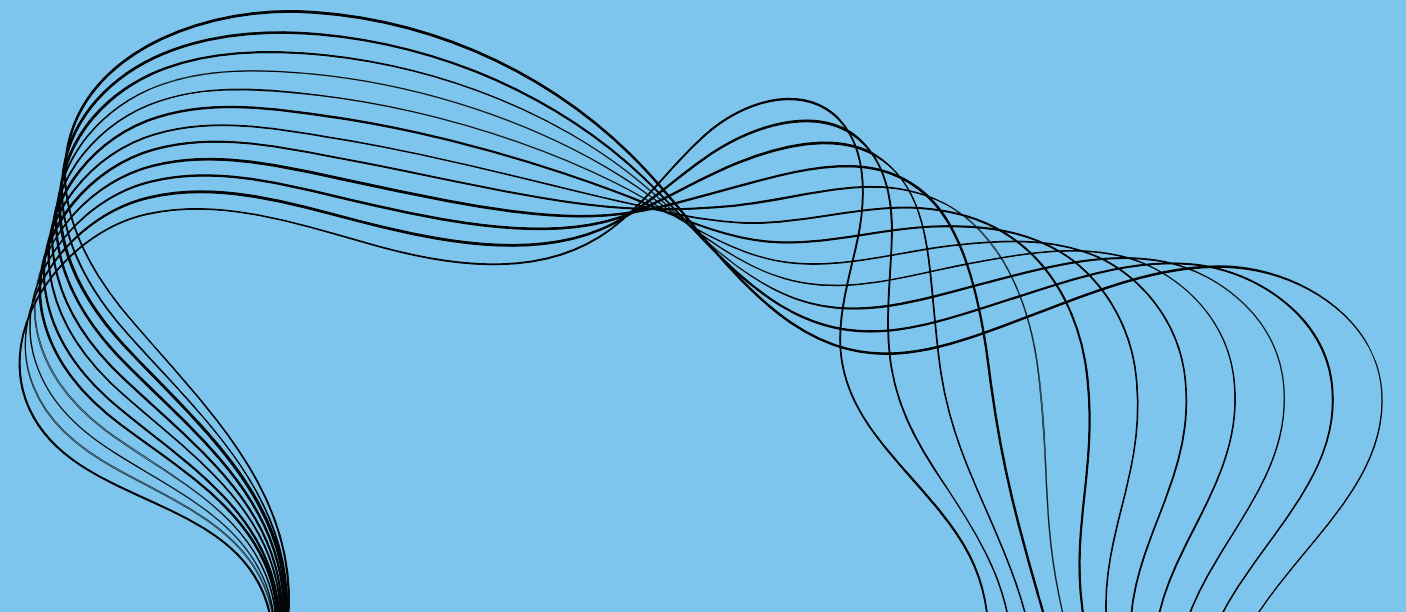
- Quality improvement is a continuous process
- Quality improvement is part of an overall clinical quality management program
- Quality improvement is a practice and a mind set
- Quality improvement aims to address underlying systems of care
- Quality improvement ideally uses a team approach
- Think of quality improvement as the action steps of your overall quality management program

Quality Assurance v. Quality Improvement

Quality assurance monitors your performance to pre-determined goals set by your funder



Quality improvement involves continuous review of your data and implementing projects to attain better performance



Quality Assurance v. Quality Improvement

Examples of QA:

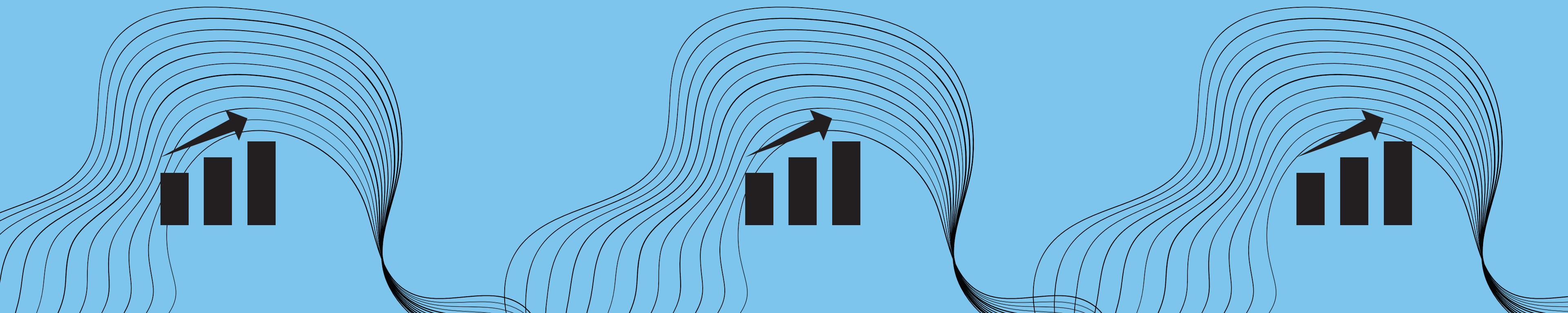
- Your contract states your agency will conduct 30 therapy groups and you have only completed 28
- Medical case managers must meet at least 85% of their chart audits for having completed charts and completed care plans

Examples of QI:

- Your viral suppression rate is 87% and the aim of your implement project is to get you to 92% within 6 months
- Your intake process takes 25 minutes, which results in clients constantly complaining and you conduct an improvement project to reduce the intake process to 10 minutes

Why is Quality Improvement Important?

- Our clients deserve our best improvement efforts
- It can achieve economies of scale and make your organization more efficient in delivering high-quality services
- It has an overall benefit to communities
- It can make your job or tasks more enjoyable and meaningful
- It's mandated – legislation and PCN #15-02



HAB Expectations for Quality Improvement (QI)

- Must use a defined quality improvement approach
- Defined approach means that a single quality improvement methodology is chosen
- The **Model for Improvement (MFI)** is one such defined approach
- Not only review your performance data quarterly, but you analyze them using quality improvement tools
- Act on your performance data – improvement means just that; focus on the results you're getting and do better next time

Model for Improvement

Continual Improvement?



"I want you to find a bold and innovative way to do everything exactly the same way we've done it for 25 years..."

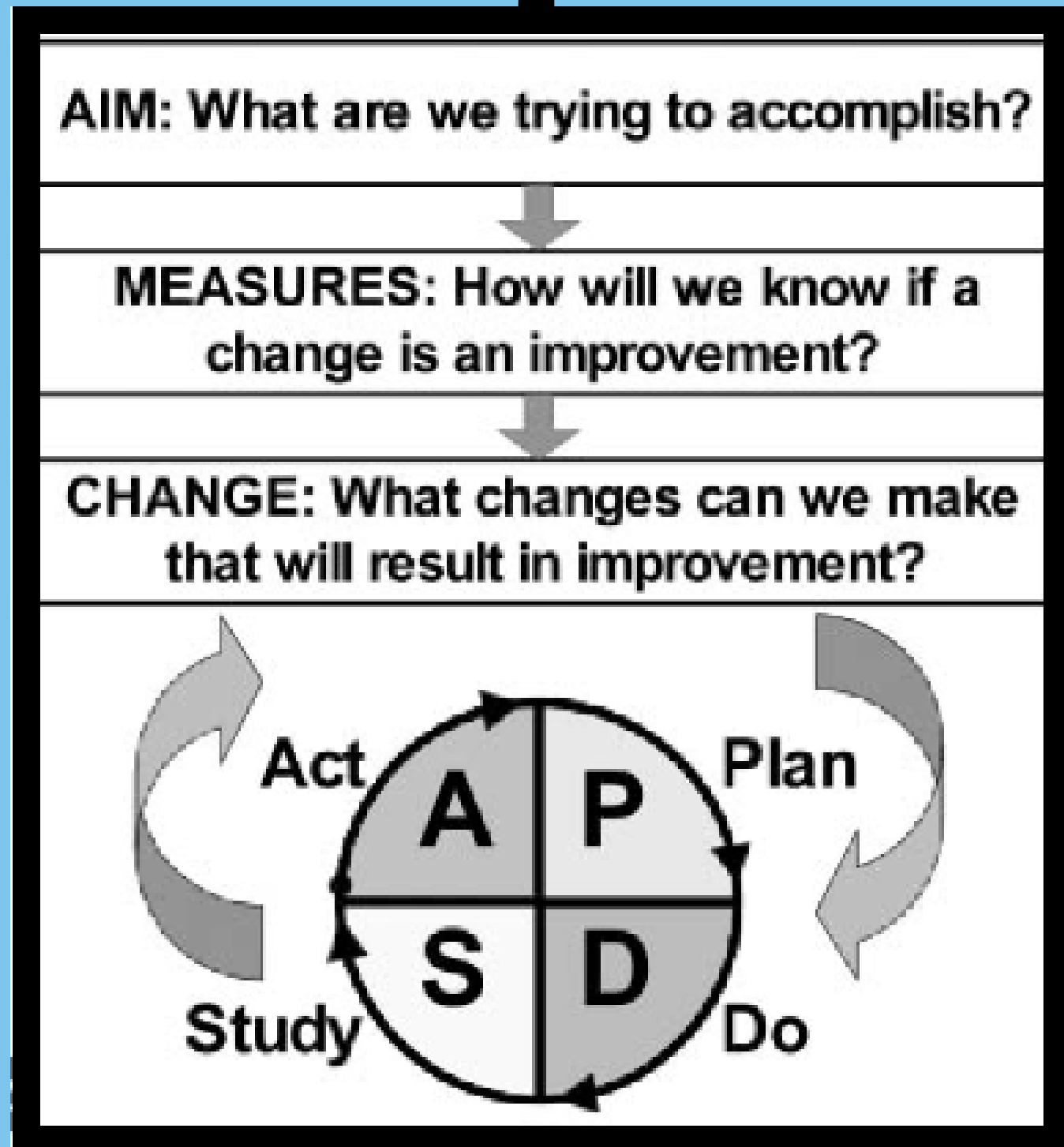
A Defined Approach to Quality Improvement

The Model for Improvement was founded on developing methods and capability to improve processes.

The Model for Improvement

The has two parts:

- Three fundamental questions, which can be addressed in any order.
- The Plan-Do-Study-Act (PDSA) cycle to test changes in real work settings.

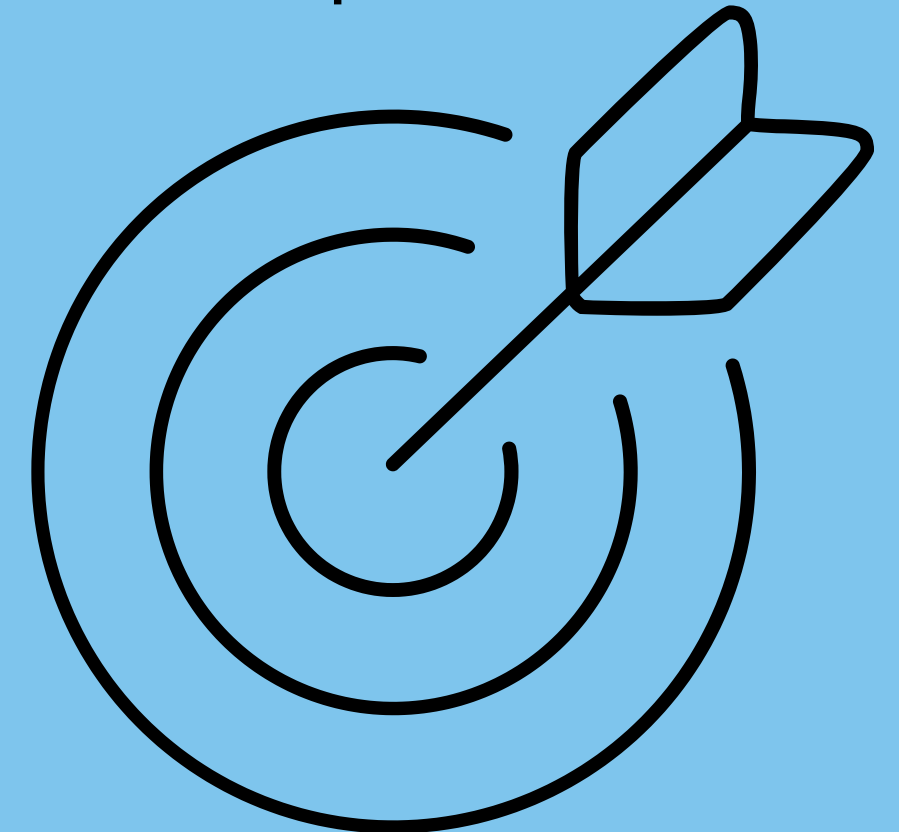
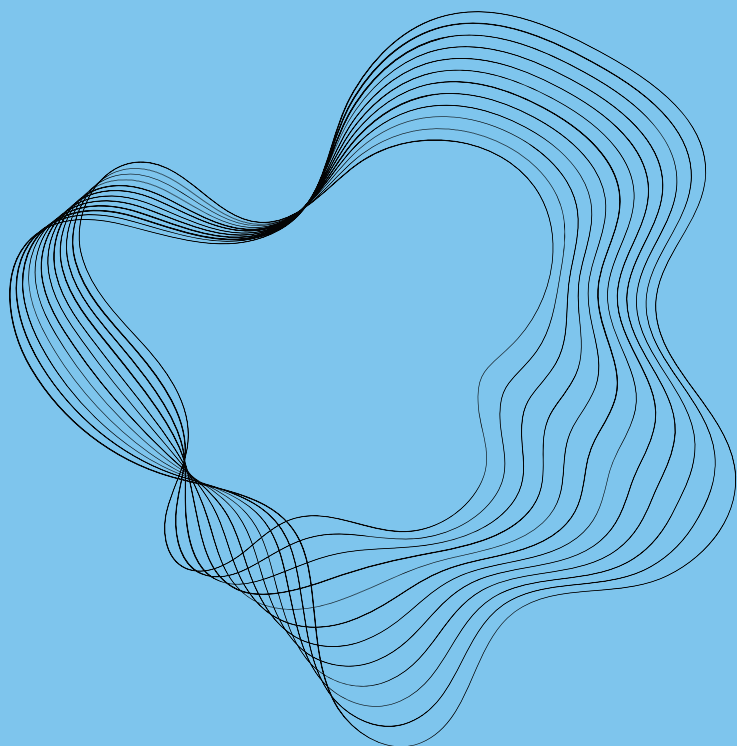


Step 1: What Are We Trying to Accomplish

- The Aim statement is the first step in the Model for Improvement:
“What are we trying to accomplish?”

Template:

Organization Name seeks to achieve an [increase/decrease] in
[# of or %] in improvement areas from [what to what] by [define period]



The Hypothesis

“If we provide more MH screenings to clients, then we will increase referrals for MH services”



The Hypothesis

- drives the changes you will make
- generates buy-in and understanding of the project

Step 2: How Will We Know a Change Is an Improvement?

- This is where we start to understand the components of an improvement opportunity

"_____ will increase the number of patients referred for _____ services from _____ to _____ from _____ to _____."

- We need measures to determine if we are making an improvement.
- Process Measure – how do we get there?

Example: How many patients were assessed for MH needs?

- Outcome Measure – what is the end goal; where do we want to wind up?

Example: Number of MH referrals made?

Step 3: What Change Can We Make That Will Result in Improvement?

**While all changes do not lead to improvement,
all improvement requires change.**

Changes should be informed by your data – (qualitative and quantitative)

- Qualitative data is non-numeric, descriptive, categorical

Example: RSR housing status

- Quantitative measures look at values or counts.

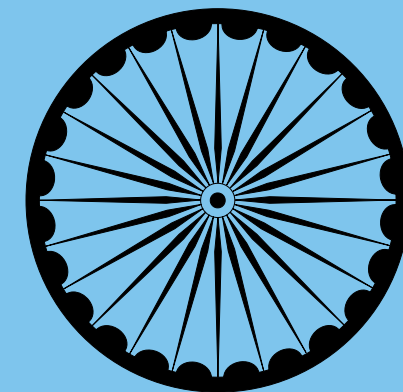
Example: How many ___ screenings were done during the measurement period?

Continued: What Change Can We Make That Will Result in Improvement?

Changes should involve the following:

- Stakeholders
- Consumers
- Those who own the process

"Don't reinvent the wheel."



Knowledge Checkpoint (Poll)

• **What are the 3 essential elements of a QM program according to PCN 15-02?**

a) Leadership, performance measurement, evaluation

b) Performance measurement, reporting, quality improvement

c) Infrastructure, performance measurement, quality improvement

• **According to PCN 15-02, how frequently must you assess the performance measures?**

a) Monthly

b) Quarterly

c) Annually

• **What are three components necessary for a good Aim Statement?**

a) Organizations name, Measurements, Timeline

b) Organization name, specify population, evaluation

c) Data, Timeline, Target goal