



AIDGwinnett, Inc.

- Non-profit HIV/AIDS service organization established in 1991.
- Serves three counties in northeast Georgia with HIV primary care, social services, housing assistance prevention education and volunteer opportunities.
- 19 staff members
- Current Caseload: 576 (males: 54%, females: 46%)
- African American/Black 51% Asian 3% Hispanic 14% Caucasian 31% Other 1%




Work Plan Format

Objective	Key Action Step(s)	Responsible Party	Evaluation




CQI Indicators from Key Action Steps

- # New Patient Comprehensive exams
- # Annual exam
- % of completed outpatient referrals
- % of Nutrition assessment
- # of Sick call triage
- % Medication Adherence Counseling
- % Lab referrals
- % STD screening




CQI Indicators from Key Action Steps

- % Completed dental referrals
- % Gender/Age specific screenings
- # HIV testing
- % Risk reduction counseling
- # Clinical supervision
- # Mental health assessment
- # Substance abuse assessment




CQI Indicators from Key Action Steps

- # Transportation referrals
- # Meal delivery for progressed patients
- # Client Navigator program
- # Continuing education for practitioners
- % Consumer involvement
- Cultural competency – Process




Undertaking CQI Activities

- Chose data set
- Establish baseline
- Review after period of time
- Make a change to improve
- Evaluate after a period of time




Work Plan Over-Arching Objective

- Provide primary medical care services to 460 currently enrolled clients and 163 (40% increase) new HIV+ clients for a total of 623 unduplicated patients by March 31, 2009.




Key Action Step (one of many)

- Clinic Staff will schedule 100% of appropriate patients for necessary vaccines and immunizations including PPDs.




Evaluation Method

- Reports generated from MIS system document all services:
 - 163 PPDs conducted for new patients
 - 185 PPDs conducted as annual
 - 100 immunizations (Twinrex/Hep A&B)




Improvement Activity

- Determine % of patients receiving PPDs
- Compare % of PPDs after a period of time.
Select all or a sampling
- Activity: Change the day of week to administer PPDs
to insure patient returns for reading
- Monitor for any significant change
- Implement new improvement activity as necessary i.e., new reminder/alert system




Cultural Competency

- Used to assess capacity to serve diverse population
- Process measure: assess capacity/structure; ability to provide written material; ability to provide medical interpreters; diversity of staff.
- Outcome measure: Quality of care for diverse population determined by access to care, and improved health care outcomes.




Improvement Activities

- Diversity training for staff
- Provision of medical interpreters
- Written education information in all languages
- Translated consents/privacy policy
- Satisfaction surveys in all languages
- Outreach=PSAs, Health Fairs, Event Calendars




Write CQI Report

- Organization name
- Date
- Indicator:
- Performance Data:
- Problem Statement: Improvement Goal:
- Team Leader and Members:
- Timeframe
 - Project Start and Stop Dates:
- Frequency of reporting:
- Describe one possible test of change (PDSA Cycle):
- Outcome:
- Next Step:



HAB Core Performance Measures


- CD4 Count
- HAART
- Medical Visits
- PCP Prophylaxis
- ARV Therapy for Pregnant Women



Medical Visit


Used to document access to care

- Guideline: routine visit every 3 to 4 months (pts seen as indicated)
- Outcome measure: Number of hospitalizations; number of ER visits
- Possible activity: extended clinic hours




Now, what do I do with this?

- CQI Report
- Work Plan Progress Report
- Incorporate in grants
- Update yearly CQI Plan




Challenges (interactive part)

- We want to hear from **YOU!**
- How does your program address these challenging indicators?
- Please list/describe activities to address these indicators




Challenging Health Indicators

- Pap Smears
- Dental
- Nutrition
- TB (PPD) follow-up
- Mental health assessment
- Gender and age screening
- Specialty care referrals and tracking




Pap Smears

<u>Key Action Steps</u>	<u>Possible Improvement Activities</u>




Dental

<u>Key Action Steps</u>	<u>Possible Improvement Activities</u>




Nutrition

<u>Key Action Steps</u>	<u>Possible Improvement Activities</u>




TB (PPD) Follow Up

<u>Key Action Steps</u>	<u>Possible Improvement Activities</u>




Mental Health Assessment

<u>Key Action Steps</u>	<u>Possible Improvement Activities</u>



Specialty Referral/Tracking

<u>Key Action Steps</u>	<u>Possible Improvement Activities</u>



Gender and Age Screening

Key Action Steps	Possible Improvement Activities



Resources

● Kaiser Family Foundation	www.kff.org
● HRSA (HAB)	hab.hrsa.gov
● CDC	www.cdc.gov
● National Quality Center	www.nationalqualitycenter.org
● Institute for Healthcare Improvement	www.ihl.org
● AIDS Meds	www.aidsmeds.com
● The Body	www.thebody.com
● HAB Clinical Measures	www.careacttarget.org



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