

# Tarrant County HIV Administrative Agency Clinical Quality Management Program

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CONFERENCE  
ON HIV CARE & TREATMENT

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# Program Overview and Quality Improvement



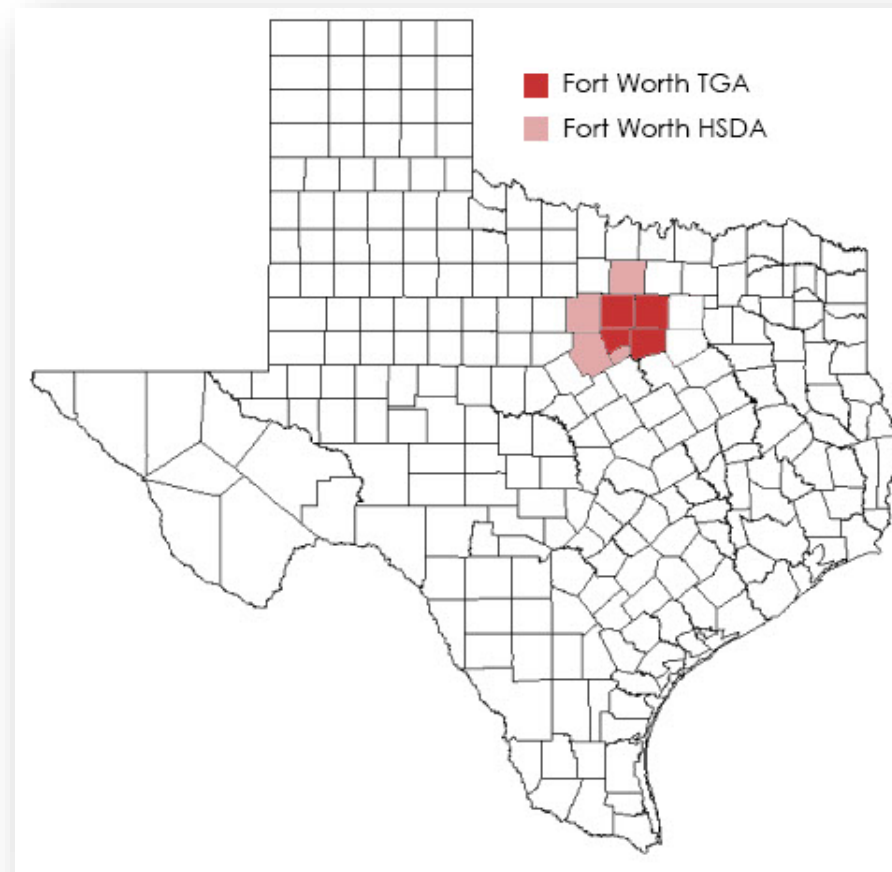
- Structure
- QI Project and Collaborative

# Fort Worth/Arlington Transitional Grant Area (TGA)

- Four north central Texas counties (Tarrant, Hood, Johnson, Parker)
- 2,918 square miles in the four-county TGA
- 85% (2,110,640\*) of the TGA's general population reside in Tarrant within its 897 square mile area
- Two major cities within Tarrant County are Fort Worth (12th largest city in US) and Arlington
- 39 other suburban cities and towns within Tarrant County
- **TGA** – Hood County, Johnson County, Parker County, and Tarrant County
- **HSDA** – add Erath County, Palo Pinto County, Somervell County, and Wise County

\*2020 Census

Fort Worth TGA, Fort Worth HSDA Map





# Grants

- Part A
- Part B
- Texas HIV State Services Funding
- Part C
- Part D
- Housing Opportunities for People with AIDS (HOPWA)
- Ending the HIV Epidemic

# Get to know Tarrant County CQM

- CQM program started prior to 2005. In 2011, the CQM program was reenergized.
- Involvement of people living with HIV is a cornerstone.
- Staff and community members have historically been active in National Quality Center and Center for Quality, Innovation, and Improvement trainings and collaboratives.
- Participated in Building Leaders of Color and Training Consumers in Quality to train the trainer to increase PLWH voices at the CQM table.
- Initiated HIT HIV, a quality consumer advisory board in 2018.
- TC AA quality program is recognized at the state and national level.

# Staff Who Support the CQM Program



Lisa Muttiah  
Grants Manager (Oversight Only)



Kaitlin Lopez  
Grant Coordinator, Quality and Planning



Rasheeda Bell  
Data Analyst



Renee Thomas  
Grants and Data Coordinator



Kaitlyn Malec  
Assistant Quality and Planning Coordinator

# Objectives

- Specific aims based in health outcomes;
- Support by identified leadership;
- Accountability for CQM activities;
- Dedicated resources; and
- Use of data and measurable outcomes to determine progress and make improvements to achieve aims.





# CQM Resources

- Lean Six Sigma Training
- IHI Open School
- LifeQI Training
- Care Coordination
- Technical Assistance
- CQM Mini Grants

## Quality Improvement Activities

1. Create + Equity Collaborative
2. PREMS + PROMS Collaborative
3. Black and Latino MSM VLS Project
4. Client-Level Data System Viral Load Suppression and Retention in Care Project
5. Professional Development
6. Studies and Assessments
7. HIT HIV

# Committee's

- Tarrant County HIV Clinical Quality Management Committee
- Quality Improvement Teams
- LPAP Formulary Committee
- HIT HIV CAB (Health Improvement Team, Community Advisory Board)

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#TarrantCounty #NMAC #BLOC #CDC



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# HIT HIV



# HIT HIV continued

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- Full, active, and engaged members
- Prepared to engage in leadership roles and activities related to HIV service delivery
- Identify opportunities to engage and participate meaningfully in decision making
- Leadership Development for community engagement including defining traits and characteristics of leaders
- Developing a community lens on the forms of stigmas including enacted and layered stigma
- Increase knowledge of the Ryan White HIV/AIDS Program
- Identifying meaningful opportunities for involvement
- Participate in evaluation activities



# Selecting and Developing Performance Measures

- Reporting on Progress
- Disruptively Innovative Solutions
- Sustainable Development Goals and Performance Measures
- Improving Health Outcomes by Reaching Priority Populations



# Performance Measures

- Performance Measures help to monitor and improve the quality of care they deliver.
  - HIV Viral Load Suppression
  - Annual Retention in Care
- Provide Enterprise has a HAB measure compliance report, which has built-in reports that calculate compliance of the measures and a disparities calculator to assist with determining disparities to care and performance measures for MAI populations.



# Performance Measures continued

- Key performance measures are reviewed at a minimum quarterly, and desktop monitoring is conducted using Provide Enterprise and quarterly chart abstraction.
- Performance measure data is analyzed first by the Grant Coordinator, Quality and Planning, Assistant Quality and Planning Coordinator, Grants Manager, and the Grants and Data Coordinator.
- Performance measure data is shared with Subrecipients, Planning Council, CQM Committee, HIT HIV, and the community at a minimum quarterly but often monthly.

Performance Measures help to monitor and improve the quality of care they deliver.





# Innovative Solutions

Mini-HAB is an algorithm written in Python that has the following functionality:

1. It can generate major HAB measures such as
  - a. Viral Load Suppression Rates
  - b. Retention in Care Rates
  - c. Prescription on ART Rates
2. It assesses a range of populations (through filtering)
3. It assesses age groups, zip codes, and for agencies that are Ryan White Funded.
4. It can automatically populate reports for agencies to determine for example who is out of care or who is not virally suppressed.



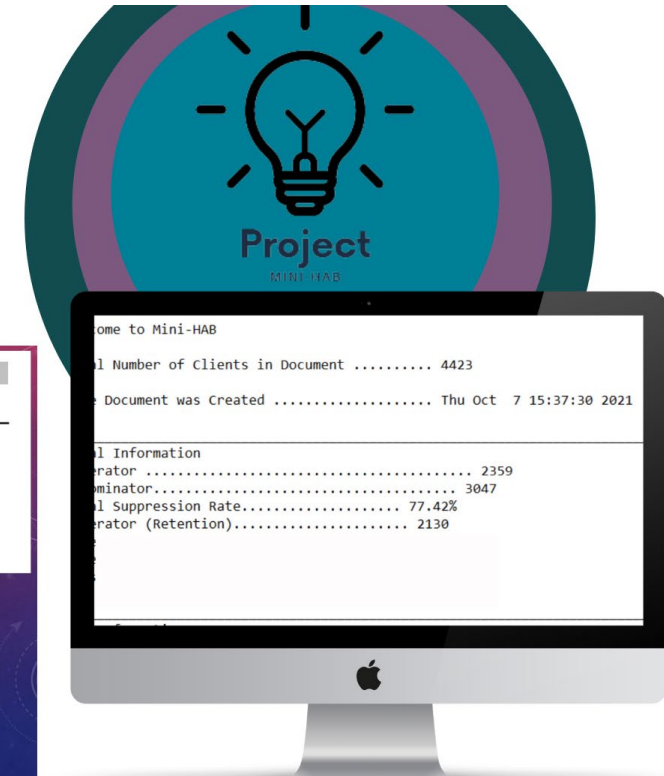
## Data Analytics

Creating innovation through data and data visualizations

HAB Clinical Performance Measures - Core			
Measure	Numerator	Denominator	Percentage
HIV Viral Load Suppression	2,320	2,929	79%
Prescription of HIV Antiretroviral Therapy	2,450	2,929	84%
HIV Medical Visit Frequency	1,128	2,037	55%
Gap in HIV Medical Visits	507	2,424	21%
PCP Prophylaxis NQF #405	0	105	0%
Annual Retention in Care	2,719	2,929	93%

Mini-HAB	
Total Number of Clients in Document	4376
Date Document was Created	Thu Mar 25 17:15:38 2021
Total Viral Load Suppression	
Numerator	2320
Denominator	2930
Viral Suppression Rate	79.18%



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