# GREATER HAMPTON ROADS HIV HEALTH SERVICES PLANNING COUNCIL

## Quality Improvement & Strategic Planning Committee Minutes Tuesday, April 20, 2021: 4:00 p.m.

#### Call to Order:

The virtual QISP Committee meeting via zoom was called to order at 4:04 p.m.

#### **Moment of Silent Reflection:**

A moment of silent reflection was held for those infected and affected by HIV/AIDS.

#### **Roll Call**

Present:Recipient/PC Support Staff:Gwendolyn Ellis-WilsonMarsha Butler – Recipient StaffRhonda RussellJacquelyne Wiggins-Recipient StaffAshley D.D. BrownThomas Schucker-PC Support StaffTanya KearneyDeryk M. Jackson-PC Support StaffTeresa Malilwe-PC Support Staff

Absent: Guests:

Jerome Cuffee Ashley Yocum – HIV Services Planner-VDH

Doris McNeill Christine Donovan –HIV Prevention Planner-VDH

Syreeta Dawkins

## **Confirmation of Notice of Meeting:**

There was no response to the notice of meeting posted. However, the notice of meeting was posted on the Norfolk TGA Website: <a href="https://www.ghrplanningcouncil.org">www.ghrplanningcouncil.org</a>.

## **Review of Minutes from last meeting:**

The minutes were reviewed. A motion was moved by Gwendolyn and properly seconded by Dr. Kearney to accept the minutes from the March 16<sup>th</sup> meeting as written. The motion passed.

## **Review the Planning Council Activity Timeline (P-CAT):**

The committee was on track with the P-CAT for the month of April 2021. For April, the committee will:

- Review P-CAT for progress
- Review Implementation of the Norfolk TGA Integrated HIV Prevention and Care Plan
- Review TGA Quality Assurance Outcomes
- Review and Provide Input for the Recipient's Quality Improvement Plan
- Define Needs Assessment

### **Parking Lot Items:**

#### **Norfolk TGA Triennial Needs Assessment:**

The committee was meeting to continue planning for the Part A Norfolk TGA Triennial Needs Assessment. However, the Recipient Office, had indicated that there might not be sufficient funds to cover the cost of the Triennial Needs Assessment.

Support Staff noted, however, that feedback from the last PSRA Process indicated that some of the data was old. They considered running a small needs assessment to see if there are any changes in the needs of the community in the TGA. As was pointed out, there is a letter from HRSA about the Integrated Plan. The letter has not yet been received. The Integrated Plan normally collates with the Triennial Needs Assessment. Support Staff, therefore, wanted to know how the committee would like to move forward.

The noted letter from HRSA is a Program letter stating that Guidance for the Integrated Plan will be coming this year, December 2021, and the due date will be December 2022.

During the teleconference call with the Project Officer, she stated that she could not give the TGA an answer as to how to proceed with the Triennial Needs Assessment. That is up to the Planning to decide how they want to proceed with that. However, HRSA has an expectation that the Triennial Needs Assessment should be completed every three years.

The committee agreement not to rush the Triennial Needs Assessment, especially if the target will be special populations, the Aging population with HIV, the Incarcerated population with HIV, and the Health Disparities. The Recipient Staff indicated that they have not been looking at any Health Disparities or working with the NCQ on Health Disparities calculator, but plan to do so this year.

The committee looked at the possibility of creating some sort of a preliminary survey tool which can be distributed to Ryan White Providers and non-Ryan White Provers, to gather data on the needs, gaps, and barriers in the community.

In response, Ms. Yocum from VDH, discussed the following which she felt could be useful to the Part A Norfolk TGA to move forward:

- Because she sits on the D.C. Part A Planning Council, she talked about what the Council
  there is doing for their Triennial Needs Assessment and wondered if the data sources that
  the D.C. Planning Council put together could be helpful for the Part A Norfolk TGA
  Planning Council.
- VDH did the Part B Needs Assessment from grant year 2019. Some Eastern Region data from the Part B Needs Assessment can be provided to Part A Norfolk TGA Planning Council for review.
- VDH can also provide the results of a quick Statewide survey for COVID-19 Needs Assessment which Part B did in 2020 on service needs and how the early pandemic affected service needs and access to services.

In response to funding for the Triennial Needs Assessment, the committee discussed what would be the best time to discuss, not only funding for the Triennial Needs Assessment, but budgets for all Planning Council sub-committees. A recommendation was discussed and agreed that a standard should be put in place for the Council to discuss and review sub-committee budget requests during the PSRA Session. The recommendation will be discussed at the next Executive Committee meeting with the Recipient Staff.

Some cost saving features of doing a Triennial Needs Assessment, would be for the committee to take on the process of creating the Needs Assessment questions. This would be free. The

committee can work with different entities, such as the Virginia Department of Health's Red Cap, google forms to do types of Needs Assessments for free and work on data as a committee.

The committee agreed to table working on the Needs Assessment until after the afore-mentioned information is received from VDH. At that time, the committee will determine what questions should be asked in order to get good data. VDH will also check if they have data from the survey that was conducted by VACAC just before the pandemic shutdown and share it with the committee.

The committee should also reach out to Providers for data, if they have conducted Client Satisfaction surveys or Case Management surveys. This will provide the committee with a collection of various Needs Assessments which can be put together to yield some fruitful information. The committee should start now, with some sort of a timeline of getting some information every month, starting with information from VDH.

For the May 18<sup>th</sup> meeting, the committee should also come prepared to compile some additional questions to reach Providers who are outside the Ryan White Program.

## **Review Norfolk TGA Part A Quality Assurance Outcomes:**

Due to the COVID-19 pandemic shutdown, the Recipient Staff noted that they did not conduct the face-to-face site visits this year. However, the Recipient Staff wanted to know what the Committee expected to be reviewed under Quality Assurance. Typically, it is to look at the outcomes of the quality assurance monitoring. This renders itself to what Service Standards are and to see adherence percentages which also renders itself to updates of Service Standards. In this case, the Recipient Staff asked the committee to look at how the Service Standards should be set up. Staff does not do peer reviews when they go out for site visits. A lot of the information the Planning Council gets during the PSRA Session, is the totality of all the monitoring that is done. The committee was also asked to indicate, well in advance, specific issues the committee expects to be covered during site visits so that staff can prepare for that.

#### **Review Service Standards:**

As a basis for today's meeting, Support Staff removed the Quality Assurance Measures from the old Standards as discussed by the Committee at the last meeting. As an example, the Project Officer also sent Service Standards from other jurisdictions for the committee to look at.

The committee discussed the importance for the Planning Council to set goals for specific measurable outcomes for quality assurance. Changing service delivery methodology where necessary renders itself to updating service standards to make them more workable and more measurable.

In the past, this was done under CQM. However, with the new guidance, it is not going to be funded under CQM. The Recipient's office was able to have a consultant go out and do the monitoring. It was noted that this is not the type of monitoring staff conducts on site visits. And, therefore, cannot provide the information. The Recipient Staff will have more conversations with the Program Manager to see how this can be done under Quality Assurance.

There was extensive discussion regarding the issue of the Council getting information about whether or not Service Standards are meeting the set goals, which some committee members felt

were set too high for a compliant outcome of consistence. It was noted however, that Quality Assurance is required by legislation. The committee, in this regard, requested that if there are Standards in place, there should be feedback on the performance of the Standards. The committee agreed to defer discussion of Service Standards and work with the Recipient Staff to change the language to make the Standards more client focused. The committee was also requested to read the MOU between the Recipient and the Planning Council.

#### **New Business:**

# **Updates on the Implementation of Norfolk TGA Integrated HIV Prevention and Care Plan:**

As earlier noted, the Virginia Department of Health is in the early planning stages of the Integrated HIV Prevention and Care Plan. VDH is gathering input such as Needs Assessments and looking at other National Programs that have come out, because Guidance might echo those. VDH is also working on a Needs Assessment collaboratively with Support Staff to make sure that Part A interests are captured within it. This is basically a survey to assess what type of technical assistance will be required. VDH is working to make sure that this is not unilateral but something that will capture input from all collaborators.

#### **Announcements:**

The 2021 Spring HIV/AIDS Conference is scheduled for Wednesday, April 21, 2021.

## **Adjournment**:

With no other business to discuss, Gwendolyn moved a motion to adjourn and was seconded by Dr. Kearney. The motion passed.

#### Adjournment:

With no further business to discuss, a motion was moved by Gwendolyn at 4:28 p.m. and properly second by Jerome to adjourn the meeting. The motion passed.

Respectfully Submitted:	
Ashley D.D. Brown - Co-Chair	