

HCS developed an electronic database system (Ryan White Application Database, a.k.a. RWAD) which allows for consistency across agencies for the reported objectives. RWAD was implemented on June 16, 2014 and the following client health outcomes are measured in RWAD and reviewed quarterly by HCS staff and CM agencies.

Measure	Case Management Client Outcome
1	Clients with a primary care/ID physician visit in the past six months
2	Clients prescribed HIV ART medications
3	Clients self-report of taking all doses of medication, as prescribed
4	Clients with a CD4/Viral load lab work completed in the past six months
5	Clients self-report of using condoms for oral sex more than half the time or always
6	Clients self-report of using condoms for vaginal sex more than half the time or always
7	Clients self-report of using condoms for anal sex more than half the time or always
8	Clients self-report of avoiding needle sharing practices (didn't share needles or shared less than half the time)
9	Clients with at least one oral health visit in the past six months
10	Clients with secondary HIV prevention /info education to increase knowledge about transmission, resistance, and reinfection
11	Clients who report stable or permanent housing

The HCS QM team also is responsible for conducting standard of care reviews for funded outpatient/ambulatory medical care (OAMC) providers. Funded medical services must meet established Health and Human Services HIV Treatment Guidelines. A priority in 2015-2016 is to improve clinical data collection which will allow the standard of care reviews to take place for all providers. All funded OAMC providers will receive a QI Standard of Care review before 3/31/2018.

VIII. Communication on Reports/ Initiatives

The purpose of this section is to detail how HCS will share QI stories, successes and other quality related updates in order to strengthen our efforts to infuse QI throughout HCS and to internal/external stakeholder agencies. Project storyboards will be distributed to internal and external stakeholders (i.e. see section II for list of stakeholders) for completed QI projects. Team members will be recognized when providing updates on the QI projects and in the storyboard. Project descriptions and results will be included on the program's website when applicable. QI updates will be communicated at HCS staff meetings, RW Part B advisory group meetings, all RW parts meeting, and to case management agencies. A detailed list of the minimum reports/activities that are to be reported on for RW year 25 is included below.

Annual Quality Improvement Reports/Reviews

WHAT	WHO	HOW	TO WHOM	WHEN
CM Agency QMAT template and feedback	Sub-grantee QM Coordinator	Electronic	RW B CM Agencies (sub-grantees)	Annually
CM Agency QM Plan feedback	Sub-grantee QM Coordinator	Electronic	RW B CM Agencies (sub-grantees)	Annually
QM Quarterly report on CM client outcomes	Sub-grantee QM Coordinator	Electronic	CM coordinator then to RW B CM Agencies (sub-grantees)	Quarterly
HCS QM Program Evaluation (HCS QI QMAT)	HCS QI committee	Electronic	HCS QM Manager	Annually
HCS QM Plan Revision	HCS QI committee	Electronic	QI Coordinator then to HCS QM Manager	Annually
Standard of Care Provider Reviews	Provider QM Coordinator	Electronic	RW B Providers	All by 3/31/2018
QM Program Standards	QM team/QI committee/ QM Manager	Electronic	Sub-grantees, Providers, Staff, all Stakeholders	Annually
QM Plan Performance Measures/Annual Goals/Program Activities Updates	QM team/QI committee	Electronic	Sub-grantees, Providers, Staff, all Stakeholders	Quarterly
Updated QM Language in RFPs, Contracts, etc.	QM team/QI committee	Electronic	Sub-grantees, Providers	Annually
H4C Performance Measures Data	Provider QM Coordinator	Electronic	Staff, All-Parts, All Stakeholders	Bi-monthly
QI Project Storyboards	QM team/QI Project teams	Electronic	All Stakeholders	At completion of each QI project

Please refer to the attachment sections 3-6 for ongoing updates.