



**Involvement of Stakeholders in Your  
Clinical Quality Management Program  
Division of State HIV/AIDS Programs  
Administrative Reverse Site Visit  
*November 15, 2023***

**LCDR Krystal West and Tracey Gantt, Nurse Consultants  
Clinical and Quality Branch, Division of Policy and Data  
HIV/AIDS Bureau (HAB)**

**Vision: Healthy Communities, Healthy People**

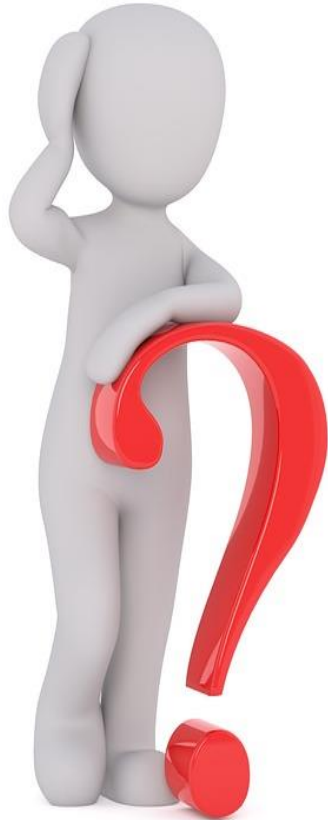


# Learning Objectives

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- Understand the value of involving stakeholders in a clinical quality management (CQM) program
- Learn the various stakeholders and the roles they could have within a CQM program
- Share best practices for involving and retaining stakeholder involvement in CQM activities

# Stakeholder Involvement (1)



What level of involvement do you believe stakeholders should have in CQM programs to maximize the benefits for HIV/AIDS programs and the communities they serve?

(Scale: 1 - Minimal to 5 - Extensive)

# PCN 15-02 Requirement

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## Expectations and requirements of stakeholder involvement

**People with HIV Involvement:** Involvement of people with HIV that reflect the population being served to help ensure that the needs of people with HIV are being addressed by CQM activities; and to provide input on CQM activities to be undertaken.

**Stakeholder Involvement:** Stakeholder involvement (e.g., subrecipients, other recipients in region, planning body members and/or its committee members) that provides input on CQM activities to be undertaken



# Stakeholder Involvement (2)

The involvement of Stakeholders in CQM programs brings several important benefits.



- **Diverse perspectives:** Stakeholders represent a broad range of individuals and groups affected by or involved in HIV/AIDS programs.
- **Enhanced program relevance:** Stakeholders can provide valuable insights into the specific needs and priorities of the communities.
- **Increased accountability and transparency:** Engaging stakeholders foster transparency and accountability within HIV/AIDS programs.
- **Improved program outcomes:** Involving stakeholders can lead to better program outcomes.
- **Sustainable partnerships:** Building partnerships with stakeholders fosters long-term collaboration and support for HIV/AIDS programs.

# Stakeholders



The Ryan White HIV/AIDS Program (RWHAP) CQM program involves various stakeholders who play distinct roles in ensuring the quality of clinical care and services provided to people with HIV.

## Stakeholder Includes:

- Subrecipients, and other recipients in the region (Parts A, B, C, D, or F)
- Planning Body/Consumer Advisory Boards
- Regional Groups/Committees/Subcommittees
- People with HIV

Others?

# Stakeholder

How are you involving stakeholders in your CQM program?

What specific benefits do you believe stakeholder involvement brings to CQM programs? What are some successful examples?

What strategies have you found most effective?



# Stakeholders Contributions

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- Setting CQM program goals
- Reviewing and providing feedback on CQM plan
- Assisting in the evaluation of the CQM program
- Discussing, planning, and executing CQM program activities
- Reviewing, identifying, and discussing performance measures
- Analyzing performance measure data
- Identifying quality improvement projects





# Stakeholders Contributions (cont.)

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- Assisting with the development and implementing of quality improvement projects
- Documenting quality improvement projects
- Sharing their quality improvement projects
- Assisting with the developing of CQM training
- Spreading the message about quality improvement activities

**Others?**



# Stakeholder Involvement: A Best Practice Model

**South Carolina Department of Health  
and Environmental Control (DHEC)  
Columbia, South Carolina  
Part B Ryan White HIV/AIDS Program  
ADAP Team  
Michelle Johnson**





South Carolina Department of Health and Environmental Control

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# Clinical Quality Management

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South Carolina ADAP

## Clinical Review Process (I) Pregnancy

- SC ADAP recognizes that enrollees typically have monthly contact with their pharmacy and less frequent contact with other providers.
  - A prenatal care (OB) provider may be providing care, but the prior prescribing physician and assigned Medical Case Manager (MCM) may be unaware of the enrollee's pregnancy since typical contact is every 6 months and the enrollee may have become pregnant after their last visit.
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## Clinical Review Process (I) cont.

- When the pharmacy receives notification of an enrollee's pregnancy, they will notify SC ADAP.
- The SC ADAP Patient Advocate will contact the enrollee's MCM and the Clinical Quality Nurse Consultant to start the clinical review process.
- Patient Advocate will notify the Medical Consultant for review. The Medical Consultant may contact the enrollee's ID physician or OB/GYN. Follow-up will be completed per Medical Consultant guidance.
- ADAP Patient Advocate will monitor enrollee throughout pregnancy and eligibility period.

## Clinical Review Process (II) - Inappropriate Therapy

- HRSA requires SC ADAP to ensure that drug therapies provided by SC ADAP are consistent with the NIH Treatment Guidelines.
- Inappropriate therapies (i.e., drug combinations that may have adverse drug reactions or that contain duplicate drug ingredients) will be flagged for the SC ADAP Clinical Review process prior to dispense.
- The SC ADAP Medical Consultant will contact the prescribing physician to discuss the requested therapy and discuss patient-centered options for treatment.
- The SC ADAP will determine whether to authorize or decline payment for the therapy.
- It is critical for physician's offices to respond to the SC ADAP Clinical Consultant, as the drug combination will not be filled until the Clinical Review outcome is complete and updated with the pharmacy.

## Clinical Review Process (III) - Viral Load Monitoring

- With changes to the CD4 and VL monitoring requirements, the SC ADAP will accept VL tests completed up to 15 months prior to the recertification.
- Recertifications with VL results older than 15 months will require a letter with date of next appointment to have a VL test collected. SC ADAP will flag the record for the Clinical Review process.
- SC ADAP will contact the physician after the appointment date to obtain the updated lab result. If no test has been completed, SC ADAP will close the enrollee.
- The Clinical Quality Nurse Consultant will contact the physician's office to review the quality of care provided (frequency of visits) as expected by HRSA.

## Additional Best Practices of SC ADAP:

The SC ADAP participates in:

- RWB site visits
- RW Part B and RW Part C MCM workgroup
- Quality Management Steering Committee
- HIV Planning Council representation on the Care and Treatment sub-committee
- RW Outreach Meeting

SC ADAP also conducts:

- Non- adherence protocol
- Expedites (includes jail and hospital discharge)



# Resources

**HRSA HIV/AIDS Bureau Performance Measures – ADAP Measures:**

<https://ryanwhite.hrsa.gov/sites/default/files/ryanwhite/grants/adap-measures.pdf>

**HHS Guidelines for the Use of Antiretroviral Agents in Adults and Adolescents with HIV:**

<https://clinicalinfo.hiv.gov/sites/default/files/guidelines/documents/adult-adolescent-arv/guidelines-adult-adolescent-arv.pdf>

**South Carolina ADAP Webpage:**

<https://scdhec.gov/aids-drug-assistance-program>

**South Carolina Ryan White Part B Medical Case Management Standards:**

<https://scdhec.gov/sites/default/files/media/document/MCM%20Standards%20Final%2003312022.pdf>

Michelle Johnson

ADAP Senior Consultant

[johnsotm@dhec.sc.gov](mailto:johnsotm@dhec.sc.gov)

# Stakeholder Involvement - Best Practice

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- **Identify relevant stakeholders**
- **Engage stakeholders from the start**
- **Clearly define roles and responsibilities**
- **Foster open and transparent communication**
- **Demonstrate value and impact**



# Stakeholder Involvement-Best Practice (cont.)

- Recognize and acknowledge contributions
- Foster collaboration and partnerships
- Support stakeholder capacity building
- Evaluate and adapt



# Stakeholder Involvement (3)

**In what ways have you  
successfully incorporated  
stakeholders into your CQM  
program?**



# HIV Quality Measures (HIVQM) Module

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- Tool within the RSR portal that allows recipients to enter aggregate data specific to the HRSA HAB Performance Measures.
- The HIVQM Module allows recipients to conduct point-in-time benchmarking across RWHAPs that use the module.
- Module opens March, June, September, and December.
- Additional resources available on [TargetHIV.org](https://www.targethiv.org).

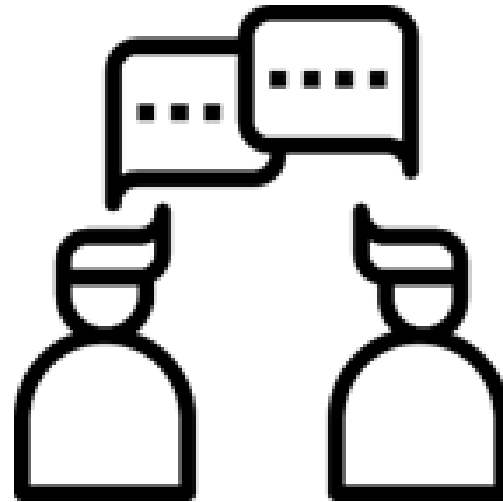


# CQM Technical Assistance

To request CQM technical assistance:

Complete the technical assistance request form located at:

<https://www.targethiv.org/ta/cqm>



# RWHAP CQM Listserv

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- **Place for people to:**
  - **Share ideas and resources**
  - **Make announcements**
  - **Ask questions**
  - **Seek resources**
- **More information and link to sign up:**  
<https://ryanwhite.hrsa.gov/grants/quality-of-care>



# Contact Information: Clinical and Quality Branch

**Tonya Bowers**

**301-287-0055**

[tbowers1@hrsa.gov](mailto:tbowers1@hrsa.gov)

**Tracey Gantt**

**301-443-1219**

[tgantt@hrsa.gov](mailto:tgantt@hrsa.gov)

**Nina Inman**

**301-443-2209**

[ninman@hrsa.gov](mailto:ninman@hrsa.gov)

**Marlene Matosky**

**301-443-0798**

[mmatosky@hrsa.gov](mailto:mmatosky@hrsa.gov)

**Michelle Osterman**

**301-443-5031**

[mosterman@hrsa.gov](mailto:mosterman@hrsa.gov)

**R. Chris Redwood**

**301-443-2118**

[rredwood@hrsa.gov](mailto:rredwood@hrsa.gov)

**LaQuanta Smalley**

**301-443-0995**

[lsmalley@hrsa.gov](mailto:lsmalley@hrsa.gov)

**Krystal West**

**301-443-1294**

[kwest@hrsa.gov](mailto:kwest@hrsa.gov)





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