

# ***New York State Department of Health AIDS Institute Ryan White Part B Quality Management Program Standards***

June 16, 2021

The New York State Department of Health AIDS Institute is committed to advancing the quality of HIV clinical care and supportive services delivered to people with HIV and to strengthen the capacity for quality management (QM) in supportive service providers throughout New York State. These goals are consistent with the mission of the AIDS Institute and the goals of the Governor's Initiative to End the Epidemic (EtE) to accelerate measurable and continuous progress toward effective and client-centered services and improved patient outcomes.

The following Ryan White Part B Quality Management Program Standards are applicable to HIV service providers that receive Ryan White HIV/AIDS Program Part B funding in New York State.

## **A) Infrastructure of the Part B Quality Management Program**

### Leadership

The HIV quality management program is actively supported and formally guided by senior program leaders who provide institutional commitment and allocate appropriate resources to ensure sustainable implementation of improvement activities.

### HIV Quality Management Committee

The Part B quality management program is supported by a quality management committee, which is accountable for Part B-specific improvement activities. The Part B quality management committee is effectively linked to the agency-wide quality management program, as evidenced by routine reporting of improvement efforts and performance measurement data. Committee member roles and responsibilities are delineated, and the involvement of clients on the committee is expected.

### Quality Management Plan

The Ryan White Part B-funded service provider has a written quality management plan that is reviewed and updated at least annually. The plan is shared with staff and clients to gather input and to promote involvement in the quality improvement activities. The plan includes the following elements:

- Quality statement describing the overall mission and purpose of the quality improvement activities
- Annual improvement goals based on identified gaps
- Quality infrastructure to outline how staff, including the agency leadership, are involved in improvement efforts, including the agency leadership, how the Part B QM committee is set up and evaluated, and how people with HIV are involved in QI activities
- Performance measurement activities describing indicators and data collection methodologies
- Quality improvement activities, including the selection and routine reporting of QI project updates
- Work plan providing an overview of the Part B QM plan implementation steps

The quality management plan includes a work plan that identifies implementation responsibilities and a timetable for their completion. It is used to monitor whether the quality improvement activities are being implemented as planned and whether goals are achieved.

The Ryan White Part B-funded service provider participates in annual organizational assessments to evaluate the existing quality management program. If needed, action steps are taken to address identified barriers to establish a robust quality management program.

## **B) Performance Measurement**

### Information System

The Ryan White Part B-funded service provider has an information system in place for monitoring the utilization of Ryan White Part B-funded services and for tracking the AIDS Institute-supported performance indicators. The information system produces meaningful performance data reports that are used for quality improvement activities.

### Performance Indicators and Submissions

Performance indicators guide the development and implementation of improvement activities. On a monthly basis, each Ryan White Part B-funded service provider is expected to accurately track all applicable AIDS Institute-provided indicator definitions and to timely report the respective performance data.

### Performance Reviews

Results from data reports generated by the service provider, as well as findings from the AIDS Institute-generated dashboards, are routinely reviewed by service provider staff to guide improvement activities. Where indicated, additional data analyses are conducted to identify potential HIV disparities across different age groups, gender, race/ethnicity, and other key populations. Data results are shared with staff and clients.

## **C) Quality Improvement Activities**

Agency-specific data findings and input by clients and staff inform the selection of improvement activities. These efforts continuously strive to improve the quality of service delivery and eliminate gaps in the health outcomes for clients. Improvement teams with cross-functional representation, including clients, are formed to investigate and improve identified priorities using quality improvement tools and methodologies.

At a minimum, each Ryan White Part B-funded service provider selects one topic for an annual quality improvement project, shares their quality improvement project updates with other service providers using the AIDS Institute-provided meeting structures, and reports their quality improvement project findings at the conclusion of the annual quality improvement project. If the Ryan White Part B-funded service provider receives funding for multiple Ryan White Part B service categories, one quality improvement project should be selected that is reflective of these funding streams.

## **D) Stakeholder Involvement**

### Client Involvement

The input, feedback, and meaningful participation of clients in prioritizing improvement projects and improvement efforts are vital. Client experience is assessed at least annually, and findings are formally integrated into improvement activities. Clients are provided relevant agency performance data results and findings. Opportunities to participate in quality improvement trainings are provided to clients who actively participate or are interested in improvement efforts.

#### Staff Involvement

Quality improvement is a shared responsibility among staff, and all staff are encouraged to actively participate in improvement activities. Service provider staff are aware of the quality management infrastructure, understand their roles in improvement activities, and actively participate in quality management program activities. Their input informs the selection of quality improvement projects and staff are informed of the objectives, progress, and results of improvement activities to increase awareness and participation in improvement efforts. Staff receive routine quality improvement training and are encouraged to participate in AIDS Institute-supported capacity building activities.