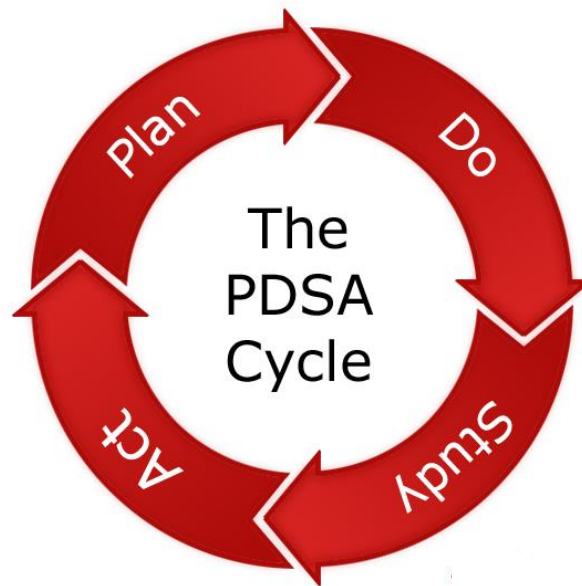


RYAN WHITE PART A LAS VEGAS TGA

# Quality Management Performance Measures Report

## GY 2012-2013

(March 1, 2012-February 28, 2013)



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## **INTRODUCTION**

This report summarizes the quality management outcomes data collected across the Las Vegas TGA during grant year 2012 (March 1, 2012-February 28, 2013). As each agency has been reviewed and received a full report on their performance, this report is a cumulative overview of the TGA's performance as a whole. Data is collected annually and used to identify shortfalls, create quality improvement plans, and continually monitor changes to ensure stability and sustainability in the Las Vegas TGA. This data may also be used by the Planning Council in their priority setting and resource allocation process to ensure client needs are being met.

### **Performance Measurement**

Performance indicators quantitatively tell us something important about our services, and the processes that deliver them. They are a tool to help us understand, manage, and improve what our organizations do.

Performance indicators let us know;

- How well we are doing,
- If we are meeting our goals,
- If our customers are satisfied,
- If and where improvements are necessary, and
- If our processes are in statistical control.

Specific performance measures have been developed for each service category and are outlined in the performance measurement data sheets, agency contracts and the TGA's Standards of Care. Each agency is held to the indicators by service category for which they have been contracted during that grant year. Three specific areas for tracking performance measurement have been outlined; agency compliance measures, client level outcome measures, and overall program performance measures. Each of these categories is outlined with their respective performance measures below.

### **Agency Compliance Measures**

All agencies are expected to uphold outlined standards to a minimum of the designated percentage goal and annually their compliance will be assessed.

### **Client Level Outcome Measures**

The Client Level Outcome Measures are a reflection of our client's progress as they access services.

## **Overall Program Performance Measures**

Overall Program Performance Measures illustrate how accessible services are in our TGA in addition to how they are perceived by the client for not only the HIV/AIDS population but the minority population as well.

The culmination of this data is imperative to understanding our progress as we strive to achieve the highest quality of service delivery in the continuum of care.

## **METHODS**

### **Data Collection**

Data regarding outlined performance measures was collected through a combination of chart abstraction at each Part A funded agency for GY 2012-2013, through CAREWare-the client level data management system utilized in the TGA, and consumer input through our annual consumer satisfaction survey.

### **Chart Abstraction**

Chart reviews are conducted at clinical care sites and support service locations annually to ensure that HIV services meet public health guidelines, standards of care, and to evaluate performance measures.

Chart reviews are conducted by quality management staff who have had detailed training in the project and are familiar with standards and processes of HIV/AIDS outpatient care. These reviews use clinic records including progress notes, flow sheets, laboratory reports and other documentation contained within the record to complete the data collection instrument. Other sources of supporting secondary data (i.e. from information systems database or billing information) are also used to fill in gaps or corroborate chart information if appropriate.

To ensure random chart selection a report was pulled from CAREWare with the identifying information of clients that accessed each service category by agency during the measurement period (March 1, 2012-February 28, 2013). Random charts from that list were pulled for analysis to fulfill the set sample size. Sample size was a minimum of 20-35 unless fewer than 20 accessed that service, in those cases all were reviewed.

### **CAREWare**

Several of the performance measures utilized in the TGA are HRSA specific and automatically populate through CAREWare by agency. The majority of these are in the service category of outpatient/ambulatory medical care allowing for periodic review throughout the year.

## **Consumer Input**

Consumer input was solicited through a survey instrument completed and returned by 185 Ryan White Part A clients in the Las Vegas TGA. Questions were asked regarding overall level of satisfaction with each service category, in addition to specific questions regarding medical care and case management service delivery processes and related workforce.

## **Data Analysis**

Data was entered into excel for analysis and randomly spot checked to ensure accuracy. An analysis of the consumer data was performed by utilizing SPSS (a statistical analysis software). This program has the capability to extract frequencies and cross tabulations resulting in indicator percentages. This process was conducted by a masters-level analyst.

## **RESULTS**

Quality management indicator percentage results are outlined by service category. To track our improvement results data collected from grant year 2009 through 2011 is also included where available, 2009 was the first data collection period. Respective goals were reviewed and agreed upon collectively by the Las Vegas TGA Quality Management Team comprised of agency staff and grantee quality management staff. Additionally, an overall analysis of the TGA is presented utilizing specific client level outcomes.

## **CORE MEDICAL SERVICES**

### **Outpatient/Ambulatory Medical Care**

#### **Performance Measurement**

Many improvements have been made in outpatient/ambulatory performance measures over the past four grant years. Several measures have increased 5% or more including; adherence assessment and counseling, Hepatitis C screenings, mental health and substance abuse screenings, Chlamydia screenings and medication education. Additionally, all of the overall program performance measures significantly exceeded their goal which indicates a very high level of consumer satisfaction among the clients accessing HIV/AIDS medical care.

While significant improvements have been made several deficiencies are still noted, including; cervical cancer screenings, Hepatitis B vaccinations, gonorrhea screenings, chlamydia screenings and HIV risk counseling. The Quality Management team is assessing and developing quality improvement projects surrounding these noted deficiencies.

All performance measures for medical care and their respective percentage and goal are included in the following table.

<b>Ambulatory/Outpatient Medical Care</b>						
<b>Agency Compliance Measures</b>						
<u>Heading</u>	<u>Definition</u>	<u>Goal</u>	<u>2012</u>	<u>2011</u>	<u>2010</u>	<u>2009</u>
<b>Medical Visits</b>	Percent of clients with HIV infection who had two or more medical visits in an HIV care setting in the measurement year.	75%	<b>63%</b>	68%	70%	56%
<b>CD4 T-Cell Count</b>	Percent of clients with HIV infection who had two or more CD4 T-cell counts performed in the measurement year.	75%	<b>53%</b>	70%	70%	50%
<b>CD4 &lt;200 with PCP Prophylaxis</b>	Percent of clients with HIV infection and a CD4 T-cell count below 200 who were prescribed PCP prophylaxis.	80%	<b>55%</b>	62%	86%	40%
<b>AIDS Clients on HAART</b>	Percent of clients with AIDS who are prescribed HAART.	95%	<b>85%</b>	94%	97%	61%
<b>Percent of Pregnant Women Prescribed ART</b>	Percent of pregnant women with HIV infection who are prescribed antiretroviral therapy.	100%	<b>na</b>	0%	0%	100%
<b>Adherence Assessment and Counseling</b>	Percent of clients with HIV infection on ARV's who were assessed and counseled for adherence two or more times in the measurement year as part of their primary care.	75%	<b>92%</b>	84%	54%	0%
<b>Cervical Cancer Screening</b>	Percent of women with HIV infection who have a pap screening in the measurement year.	70%	<b>20%</b>	36%	39%	31%
<b>Hepatitis B Vaccination</b>	Percent of clients with HIV infection who completed the vaccine series for hepatitis B.	45%	<b>25%</b>	32%	18%	12%
<b>Hepatitis C Screening</b>	Percent of clients for who Hepatitis C (HCV) screening was performed at least once since diagnosis.	75%	<b>72%</b>	76%	70%	38%
<b>HIV Risk Counseling</b>	Percent of clients with HIV infection who received HIV risk counseling within the last 12 months.	80%	<b>44%</b>	44%	53%	24%
<b>Lipid Screening</b>	Percent of clients with HIV infection on HAART who had a fasting lipid panel within the last 12 months.	80%	<b>54%</b>	24%	82%	18%
<b>Syphilis Screening</b>	Percent of adult clients with HIV infection who had a test for syphilis performed within the last 12 months.	75%	<b>55%</b>	61%	59%	33%
<b>TB Screening</b>	Percent of adult clients who received testing for LTBI (latent TB infection) at least once since HIV diagnosis.	75%	<b>54%</b>	64%	50%	33%
<b>Chlamydia Screening</b>	Percent of clients with HIV infection at risk for sexually transmitted infections (STI's) who had a test for Chlamydia within the measurement year.	70%	<b>45%</b>	26%	24%	10%
<b>Gonorrhea Screening</b>	Percent of clients with HIV infection at risk for sexually transmitted infection (STI's) who had a test for gonorrhea within the measurement year.	70%	<b>27%</b>	23%	20%	16%
<b>Hepatitis B Screening</b>	Percent of clients with HIV infection who have been screened for Hepatitis B virus infection status.	80%	<b>59%</b>	59%	45%	11%
<b>Influenza Vaccination</b>	Percent of clients with HIV infection who have received a influenza vaccination within the last 12 months.	50%	<b>25%</b>	40%	43%	39%
<b>MAC Prophylaxis</b>	Percent of clients with HIV infection and a CD4 T-cell count <50 who were prescribed Mycobacterium Acium Complex (MAC) prophylaxis within the measurement year.	85%	<b>0%</b>	0%	0%	0%
<b>Mental Health</b>	Percent of clients with HIV infection who have had a mental health screening within the last 12 months.	45%	<b>99%</b>	78%	46%	0%
<b>Pneumococcal Vaccination</b>	Percent of clients with HIV infection who have ever received pneumococcal vaccine.	75%	<b>55%</b>	69%	40%	23%
<b>Substance Use Screening</b>	Percent of new clients with HIV infection who have been screened for substance use (alcohol and drugs) in the last 12 months.	45%	<b>99%</b>	75%	50%	0%
<b>Toxoplasma Screening</b>	Percent of clients with HIV infection for whom a toxoplasma screening was performed at least once since the diagnosis of HIV.	80%	<b>55%</b>	60%	46%	23%
<b>Oral Exam</b>	Percent of HIV infected clients who had an oral exam by a dentist during the measurement year based on patient self report or other documentation.	70%	<b>na</b>	na	na	na
<b>Viral Load Monitoring</b>	Percent of patients, regardless of age, with a diagnosis of HIV/AIDS with a viral load test performed at least every six months during the measurement year.	90%	<b>80%</b>	80%	69%	na
<b>Viral Load Suppression</b>	Percent of patients, regardless of age, with a diagnosis of HIV/AIDS with viral load below limits of quantification at last test during the measurement year.	75%	<b>68%</b>	68%	100%	na
<b>Medication Education</b>	Percent of clients who were prescribed new medication and received medication education concurrently.	80%	<b>86%</b>	68%	100%	40%
<b>Initial Comprehensive Assessment</b>	Percent of new clients that have documentation in the client chart of an initial comprehensive assessment including a general medical history, a comprehensive HIV related history and a comprehensive physical examination within thirty days of initial appointment.	100%	<b>100%</b>	100%	100%	na
<b>Annual Reassessment</b>	Percent of existing clients that have documentation in the client chart of an annual comprehensive assessment including a detailed medical history and physical examination.	100%	<b>100%</b>	100%	100%	na

<b>Ambulatory/Outpatient Medical Care</b>						
<b>Client Level Outcome Measures</b>						
<u>Heading</u>	<u>Definition</u>	<u>Goal</u>	<u>2012</u>	<u>2011</u>	<u>2010</u>	<u>2009</u>
<b>Disease Status at Time of Entry Into Care</b>	Percent of individuals that have an AIDS diagnosis (CD4 T-cell count of <200) at time of initial outpatient/ambulatory medical care visits in the measurement year.	20%	<b>30%</b>	31%	27%	na
<b>Stabilized CD4</b>	Percent of clients will have stabilized ( $\geq 200$ ) or increased their CD4 T-cell count from initial labs during the measurement period to final labs during the measurement period.	75%	<b>90%</b>	88%	91%	72%
<b>Most Recent CD4 Stable</b>	Percent of clients with at least one CD4 T-cell count within the measurement year and those that are considered medically stable ( $CD_4 \geq 200$ ).	75%	<b>84%</b>	88%	91%	na
<b>Undetectable Viral Load</b>	Percent of clients will have a viral load that remained undetectable or decreased to $\leq 50$ from initial labs during the measurement period to final labs during the measurement period.	75%	<b>70%</b>	71%	74%	na
<b>Most Recent Viral Load Undetectable</b>	Percent of clients with at least one viral load within the measurement year will be considered undetectable ( $< 50$ ).	75%	<b>64%</b>	71%	67%	na
<b>Ambulatory/Outpatient Medical Care</b>						
<b>Overall Program Performance Measures</b>						
<u>Heading</u>	<u>Definition</u>	<u>Goal</u>	<u>2012</u>	<u>2011</u>	<u>2010</u>	<u>2009</u>
<b>Client Satisfaction</b>	Percent of clients that report being very satisfied or satisfied with the medical care they received over the last 12 months for their HIV/AIDS status.	75%	<b>89%</b>	85%	88%	na
<b>Understanding Lab Results</b>	Percent of clients that report their HIV medical providers/HIV doctors took the time to help them understand their lab results, such as; CD4 and viral load, and what it means for their health.	65%	<b>87%</b>	78%	73%	na
<b>Understanding Medication Side Effects</b>	Percent of clients that report that their HIV medical provider/HIV doctor took the time to explain the side effects of their medication.	65%	<b>96%</b>	66%	69%	na
<b>Understanding Prescribed Medication</b>	Percent of clients that report that their HIV medical provider/HIV doctors took the time to explain how important it is to take medication as prescribed.	65%	<b>92%</b>	82%	76%	na
<b>Availability of Care</b>	Percent of clients that report that they were able to schedule medical appointments within a reasonable period of time (soon enough for their needs).	65%	<b>80%</b>	66%	74%	na
<b>Comfort Level with Medical Providers</b>	Percent of clients that report feeling comfortable talking to their HIV medical provider/HIV doctors about personal or intimate issues.	65%	<b>79%</b>	75%	71%	na
<b>Medication Assistance</b>	Percent of clients that report being satisfied with the process for receiving their HIV/AIDS medication over the last 12 months.	65%	<b>88%</b>	84%	89%	na

## **Medical Case Management Services**

Three levels of case management have been developed within the Medical Case Management service category; Intensive Medical Case Management-Medical and Medical Case Management-Social and Medical Case Management. Medical Case Management Social and Medical Case Management are combined for reporting purposes as they adhere to the same indicators and performance goals.

### **Intensive Medical Case Management-Medical**

Intensive Medical Case Management-Medical is to be provided by a Master's/Bachelor's level Registered Nurse (RN) or RN with a minimum of 2 years of case management experience and should be provided for a period not to exceed six months. This is essential to ensure the client is medically stable before they are released into the care system on a more self-sufficiency focused program.

<b>Intensive Medical Case Management-Medical</b>						
<b>Agency Compliance Measures</b>						
<u>Heading</u>	<u>Definition</u>	<u>Goal</u>	<u>2012</u>	<u>2011</u>	<u>2010</u>	<u>2009</u>
<b>Assigned to Case Manager</b>	Percent of clients will be assigned to a Case Manager upon intake.	100%	<b>100%</b>	100%	100%	na
<b>Complete Client Acuity Form</b>	Percent of newly enrolled clients during the measurement period will have an acuity form documented in the client chart on intake.	95%	<b>100%</b>	100%	67%	na
<b>Nursing Assessment</b>	Percent of clients entering Intensive Medical Case Management-Medical will have a nursing assessment performed and documented on intake or within their first three appointments.	95%	<b>94%</b>	92%	80%	na
<b>Client Care Plan or Individual Service Plan</b>	Percent of newly enrolled clients during the measurement period will have a Client Care Plan or Individual Service Plan documented in the client chart on intake.	100%	<b>100%</b>	100%	83%	na
<b>Current Labs</b>	Percent of clients will have current labs (dated no more than 12 months from current date of service) documented on intake.	85%	<b>100%</b>	100%	79%	na
<b>Client Reassessment</b>	Percent of clients will have a completed reassessment form documented twice each at least three months apart within the 12 month measurement period.	85%	<b>100%</b>	55%	na	na
<b>Updated Client Acuity</b>	Percent of clients will have an updated client acuity documented at least twice each at least three months apart within the 12 month measurement period.	85%	<b>100%</b>	100%	na	na
<b>Transitioned Within Six Months of Initial Contact</b>	Percent of clients in Intensive Medical Case Management-Medical services that were transitioned into another level of care or program within six months of initial contact (exclusions apply).	85%	<b>100%</b>	86%	na	na
<b>Justification of Continued Intensive Medical Case Management Services</b>	Clients found to be in need of Intensive Medical Case Management services beyond the six month mark (and don't fall within the allotted exceptions), an acceptable explanation and verification of Part A eligibility must be provided in the CAREWare custom tab no more than two business days from the determination.	100%	<b>na</b>	100%	na	na
<b>Client Follow-up Every Month</b>	Percent clients will have a follow-up documented by a Medical Case Management client encounter form (or other approved method such as case notes) at a minimum of once per month.	85%	<b>88%</b>	100%	96%	na
<b>Discharge Summary</b>	Percent of clients discharged from case management will have a discharge summary documented in the client chart or in CAREWare.	90%	<b>100%</b>	100%	88%	na
<b>Final Acuity at Discharge</b>	Percent of clients will have an updated acuity score documented in their chart at the time of discharge.	90%	<b>63%</b>	89%	12%	na
<b>Intensive Medical Case Management-Medical</b>						
<b>Client Level Outcome Measures</b>						
<u>Heading</u>	<u>Definition</u>	<u>Goal</u>	<u>2012</u>	<u>2011</u>	<u>2010</u>	<u>2009</u>
<b>Maintained Adherence to Medical Care (HRSA HAB measure)</b>	Percent of clients that maintain adherence to medical care visits within the measurement year (at least two medical visits with a provider with prescribing privileges at least three months apart within the measurement year).	75%	<b>25%</b>	100%	67%	na
<b>Stabilized CD4</b>	Percent of clients will have stabilized ( $\geq 200$ ) or increased their CD4 T-cell count from initial labs during the measurement period to final labs during the measurement period.	75%	<b>90%</b>	55%	71%	na
<b>Most Recent CD4 Stable</b>	Percent of clients with at least one CD4 T-cell count within the measurement year and those that are considered medically stable ( $CD4 \geq 200$ ).	75%	<b>77%</b>	67%	71%	na
<b>Undetectable Viral Load</b>	Percent of clients will have a viral load that remained undetectable or decreased to $\leq 50$ from initial labs during the measurement period to final labs during the measurement period.	75%	<b>77%</b>	50%	63%	na
<b>Most Recent Viral Load Undetectable</b>	Percent of clients with at least one viral load within the measurement year will be considered undetectable ( $< 50$ ).	75%	<b>46%</b>	55%	67%	na
<b>Decreased Client Acuity</b>	Percent of clients will have a decreased client acuity score from initial score on intake to final score at discharge or final score within the measurement period.	90%	<b>40%</b>	100%	100%	na



<b>Intensive Medical Case Management-Medical</b>						
<b>Overall Program Performance Measures</b>						
<u>Heading</u>	<u>Definition</u>	<u>Goal</u>	<u>2012</u>	<u>2011</u>	<u>2010</u>	<u>2009</u>
<b>Client Satisfaction</b>	Percent of clients will report being very satisfied or satisfied with the services they received from community case managers and social workers for their HIV/AIDS status over the last 12 months.	75%	<b>85%</b>	78%	84%	na
<b>Received the Care and Services Needed</b>	Percent of clients will report that their case manager helped them get the services they need.	65%	<b>78%</b>	69%	69%	na
<b>Received Needed Referrals</b>	Percent of clients will report getting the referrals they were in need of.	65%	<b>74%</b>	65%	68%	na
<b>Understand Case Management Care Plan</b>	Percent of clients will report that their case manager helped them understand their case management care plan.	65%	<b>69%</b>	54%	62%	na
<b>Improved Psychosocial Status</b>	Percent of clients will report that their case manager helped them improve the problems, feelings, or situations they discussed.	65%	<b>73%</b>	57%	65%	na
<b>Importance of Medical Care</b>	Percent of clients will report that their case manager talked to them about their HIV medical care and the importance of keeping their doctors appointments.	65%	<b>74%</b>	57%	68%	na
<b>Importance of Taking Medication as Prescribed</b>	Percent of clients will report that their case manager talked to them about their HIV medication and the importance of taking their medication as prescribed by their doctor.	65%	<b>77%</b>	63%	69%	na

### **Medical Case Management-Social and Medical Case Management**

The Social component of Medical Case Management is provided by a Social Worker whereas general Medical Case Management is provided by trained professionals with two years or more of experience and provided to those who need assistance and follow-up with medical care. These categories are delineated by client acuity and many clients require the skills and support of both components of case management depending on their situation and needs at that time.

<b>Medical Case Management-Social and Medical Case Management</b>						
<b>Client Level Outcome Measures</b>						
<u>Heading</u>	<u>Definition</u>	<u>Goal</u>	<u>2012</u>	<u>2011</u>	<u>2010</u>	<u>2009</u>
<b>Maintained Adherence to Medical Care (HRSA HAB measure)</b>	Percent of clients that maintain adherence to medical care visits within the measurement year (at least two medical visits with a provider with prescribing privileges at least three months apart within the measurement year).	75%	<b>41%</b>	78%	81%	71%
<b>Stabilized CD4</b>	Percent of clients will have stabilized ( $\geq 200$ ) or increased their CD4 T-cell count from initial labs during the measurement period to final labs during the measurement period.	75%	<b>88%</b>	95%	98%	na
<b>Most Recent CD4 Stable</b>	Percent of clients with at least one CD4 T-cell count within the measurement year and those that are considered medically stable ( $CD_4 \geq 200$ ).	75%	<b>77%</b>	92%	88%	na
<b>Undetectable Viral Load</b>	Percent of clients will have a viral load that remained undetectable or decreased to $\leq 50$ from initial labs during the measurement period to final labs during the measurement period.	75%	<b>73%</b>	82%	58%	na
<b>Most Recent Viral Load Undetectable</b>	Percent of clients with at least one viral load within the measurement year will be considered undetectable ( $< 50$ ).	75%	<b>58%</b>	78%	60%	na
<b>Decreased Client Acuity</b>	Percent of clients will have a decreased client acuity score from initial score on intake to final score at discharge or final score within the measurement period.	90%	<b>54%</b>	50%	73%	na

**Medical Case Management-Social and Medical Case Management**

**Agency Compliance Measures**

<u>Heading</u>	<u>Definition</u>	<u>Goal</u>	<u>2012</u>	<u>2011</u>	<u>2010</u>	<u>2009</u>
<b>Assigned to Case Manager</b>	Percent of clients will be assigned to a Case Manager upon intake.	100%	<b>100%</b>	97%	100%	na
<b>Complete Ryan White Part A Client Registration Form</b>	Percent of newly enrolled clients during the measurement period will have a Ryan White Part A Client Registration Form documented in the client chart on intake.	100%	<b>100%</b>	100%	100%	na
<b>Client Care Plan or Individual Service Plan</b>	Percent of newly enrolled clients during the measurement period will have a Client Care Plan or Individual Service Plan documented in the client chart on intake.	100%	<b>100%</b>	100%	100%	88%
<b>Complete Client Acuity Form</b>	Percent of newly enrolled clients during the measurement period will have an acuity form documented in the client chart on intake.	100%	<b>100%</b>	100%	100%	5%
<b>Medical Appointment Adherence Screening</b>	Percent of newly enrolled clients that have an HIV/AIDS medical appointment adherence screening documented on intake.	85%	<b>100%</b>	100%	na	na
<b>HIV/AIDS Medication Adherence Screening</b>	Percent of newly enrolled clients that have an HIV/AIDS medication adherence screening documented on intake.	85%	<b>100%</b>	100%	na	na
<b>Nutritional Assessment</b>	Percent of newly enrolled clients that have a nutritional assessment documented on intake.	85%	<b>100%</b>	100%	na	na
<b>Substance Abuse Screening</b>	Percent of clients that have a CAGE substance/alcohol abuse screening documented on intake.	85%	<b>100%</b>	100%	na	na
<b>Substance Abuse Referral</b>	Percent of clients scoring within appropriate levels that received a referral for substance abuse services.	75%	<b>100%</b>	100%	na	na
<b>Mental Health Screening</b>	Percent of newly enrolled clients that have an evaluation of mental health disorders screening documented on intake.	85%	<b>100%</b>	100%	na	na
<b>Mental Health Referral</b>	Percent of clients scoring within appropriate levels that received a referral for mental health services.	75%	<b>100%</b>	100%	na	na
<b>Current Labs Assigned to Case Manager</b>	Percent of clients will have current labs (dated no more than 12 months from current date of service) documented on intake.	85%	<b>92%</b>	100%	97%	83%
<b>Client Reassessment</b>	Percent of clients that have an assigned case manager.	85%	<b>86%</b>	84%	na	na
<b>Updated Client Acuity</b>	Percent of clients will have a completed reassessment form documented twice each at least three months apart within the 12 month measurement period.	85%	<b>100%</b>	93%	93%	na
<b>Updated Client Care Plan or Individual Service Plan</b>	Percent of clients will have an updated client acuity documented at least twice each at least three months apart within the 12 month measurement period.	85%	<b>100%</b>	91%	97%	90%
<b>Medical Appointment Adherence Screening</b>	Percent of clients will have an updated ISP documented at least twice each at least three months apart within the 12 month measurement period.	85%	<b>100%</b>	95%	98%	88%
<b>HIV/AIDS Medication Adherence Screening</b>	Percent of clients that have an HIV/AIDS medical appointment adherence screening documented every six months.	85%	<b>91%</b>	91%	na	na
<b>Nutritional Assessment</b>	Percent of clients that have an HIV/AIDS medication adherence screening documented every six months.	85%	<b>91%</b>	91%	na	na
<b>Substance Abuse Screening</b>	Percent of clients that have a nutritional assessment documented every six months.	85%	<b>91%</b>	93%	na	na
<b>Substance Abuse Referral</b>	Percent of clients that have a CAGE substance/alcohol abuse screening documented every six months.	85%	<b>89%</b>	93%	na	na
<b>Mental Health Screening</b>	Percent of clients scoring within appropriate levels that received a referral for substance abuse services.	75%	<b>0%</b>	na	na	na
<b>Mental Health Referral</b>	Percent of clients that have an evaluation of mental health disorders screening documented every six months.	85%	<b>91%</b>	91%	na	na
<b>Current Labs</b>	Percent of clients scoring within appropriate levels that received a referral for mental health services.	85%	<b>67%</b>	100%	na	na
<b>Client Follow-up Every Three Months</b>	Percent of clients will have current labs (dated no more than 12 months from current date of service) documented within the measurement period.	85%	<b>96%</b>	90%	na	na
<b>Discharge Summary</b>	Percent clients will have a follow-up documented by a Medical Case Management client encounter form (or other approved method such as case notes) at least twice per year in between each period of reassessment.	85%	<b>63%</b>	52%	47%	na
	Percent of clients discharged from case management will have a discharge summary documented in the client chart or in CAREWare.	90%	<b>98%</b>	21%	na	na

<b>Medical Case Management</b>						
<b>Overall Program Performance Measures</b>						
<u>Heading</u>	<u>Definition</u>	<u>Goal</u>	<u>2012</u>	<u>2011</u>	<u>2010</u>	<u>2009</u>
<b>Client Satisfaction</b>	Percent of clients will report being very satisfied or satisfied with the services they received from community case managers and social workers for their HIV/AIDS status over the last 12 months.	75%	85%	78%	84%	na
<b>Received the Care and Services Needed</b>	Percent of clients will report that their case manager helped them get the services they need.	65%	78%	69%	69%	na
<b>Received Needed Referrals</b>	Percent of clients will report getting the referrals they were in need of.	65%	74%	65%	68%	na
<b>Understand Case Management Care Plan</b>	Percent of clients will report that their case manager helped them understand their case management care plan.	65%	69%	54%	62%	na
<b>Improved Psychosocial Status</b>	Percent of clients will report that their case manager helped them improve the problems, feelings, or situations they discussed.	65%	73%	57%	65%	na
<b>Importance of Medical Care</b>	Percent of clients will report that their case manager talked to them about their HIV medical care and the importance of keeping their doctors appointments.	65%	74%	65%	68%	na
<b>Importance of Taking Medication as Prescribed</b>	Percent of clients will report that their case manager talked to them about their HIV medication and the importance of taking their medication as prescribed by their doctor.	65%	77%	63%	69%	na

In 2011 the indicator of “discharge summary” was very low, 21%. A quality improvement project was created surrounding this measure and agencies providing case management were sent quarterly reports from CAREWare that included names of clients that had been out of care for nine months or more that needed follow-up and discharge notes. As you can see that from 2011-2012 this indicator jumped from 21% to 98%. Clients were contacted and many were found to have moved, passed away, or were able to get on another funding source for HIV care. Many were also brought back into the care system due to these efforts. Case management staff should be commended for their hard work in understanding the deficiency and coming together to create a successful improvement project which can be clearly identified by the data shown.

Nearly all agency compliance measures under Medical Case Management exceeded the expected goal with the exception of the client follow-up every three months. For a period of time reports were pulled from CAREWare indicating clients that required follow-up and the time frame with which they should be contacted. While numbers have increased over the last three years from 47% in 2010, 52% in 2011 and 63% in 2012 reaching our goal of 85% is still within arms-reach. This project will be revisited and case management staff contacted to discuss current practices and how the grantee staff can support a quality improvement project surrounding this performance measure.

As for the client level outcome measures, our goal is that 90% of clients will have a decreased acuity score from initial visit in the grant year to final visit in the grant year. In 2011 we reached 50% and in 2012 54%. The quality management team is looking into this deficiency along with the grantee staff to collaborate on an improvement project.

### Health Insurance Premium and Cost Sharing Assistance

Clients accessing health insurance premium and cost sharing assistance services also exhibited positive health outcomes. This service category is now 100% funded through Ryan White Part B in the state of Nevada and Part A continues to provide this service to Mohave County clients only. This transition of funding sources took place at the beginning of grant year 2013 at the direction of HRSA.

<b>Health Insurance Premium and Cost Sharing Assistance</b>						
<b>Agency Compliance Measures</b>						
<u>Heading</u>	<u>Definition</u>	<u>Goal</u>	<u>2012</u>	<u>2011</u>	<u>2010</u>	<u>2009</u>
<b>Health Insurance Premium and Cost Sharing Assistance</b>						
<b>Client Level Outcome Measures</b>						
<u>Heading</u>	<u>Definition</u>	<u>Goal</u>	<u>2012</u>	<u>2011</u>	<u>2010</u>	<u>2009</u>
<b>Maintained Adherence to Medical Care (HRSA HAB measure)</b>	Percent of clients that maintain adherence to medical care visits within the measurement year (at least two medical visits with a provider with prescribing privileges at least three months apart within the measurement year).	75%	<b>39%</b>	69%	64%	na
<b>Stabilized CD4</b>	Percent of clients will have stabilized ( $\geq 200$ ) or increased their CD4 T-cell count from initial labs during the measurement period to final labs during the measurement period.	75%	<b>100%</b>	87%	93%	na
<b>Most Recent CD4 Stable</b>	Percent of clients with at least one CD4 T-cell count within the measurement year and those that are considered medically stable ( $CD_4 \geq 200$ ).	75%	<b>88%</b>	85%	95%	na
<b>Undetectable Viral Load</b>	Percent of clients will have a viral load that remained undetectable or decreased to $\leq 50$ from initial labs during the measurement period to final labs during the measurement period.	75%	<b>92%</b>	71%	54%	na
<b>Most Recent Viral Load Undetectable</b>	Percent of clients with at least one viral load within the measurement year will be considered undetectable ( $< 50$ ).	75%	<b>55%</b>	76%	69%	na
<b>Health Insurance Premium and Cost Sharing Assistance</b>						
<b>Overall Program Performance Measures</b>						
<u>Heading</u>	<u>Definition</u>	<u>Goal</u>	<u>2012</u>	<u>2011</u>	<u>2010</u>	<u>2009</u>
<b>Client Satisfaction</b>	Percent of clients will report being very satisfied or satisfied with the services they received with their health insurance related needs for their HIV/AIDS status over the last 12 months.	75%	<b>87%</b>	78%	na	na

The client satisfaction rating exceeded the goal by 12% indicating a very high level of satisfaction for those that accessed the service.

### Medical Nutrition Therapy Including Nutritional Supplements

Positive health outcomes can also be tracked for clients that accessed medical nutrition therapy during grant year 2012. It should be noted that 86% of clients accessing the service reported they had experienced improved overall health which is up from 68% during the previous grant year. Additionally, 79% reported decreased symptoms related to their HIV/AIDS status by accessing medical nutrition therapy.

Overall there was a high rate of client satisfaction, 88% and a significant increase in the distribution of community food lists from 60% the previous grant year to 73% in 2012. The community food and resource list will continue to be updated annually and dispersed to all agencies for distribution to all clients.

<b>Medical Nutrition Therapy</b>						
<b>Agency Compliance Measures</b>						
<u>Heading</u>	<u>Definition</u>	<u>Goal</u>	<u>2012</u>	<u>2011</u>	<u>2010</u>	<u>2009</u>
<b>Intake and Initial Assessment</b>	Percent of clients will receive a comprehensive intake and initial assessment including; 24 hour dietary recall, nutrition and wellness assessment, individualized nutrition plan.	85%	76%	63%	na	na
<b>Reassessment</b>	Percent of clients that receive a comprehensive six month reassessment including; 24 hour dietary recall, nutrition and wellness assessment, individualized nutrition plan.	85%	75%	70%	na	na
<b>Medical Nutrition Therapy</b>						
<b>Client Level Outcome Measures</b>						
<u>Heading</u>	<u>Definition</u>	<u>Goal</u>	<u>2012</u>	<u>2011</u>	<u>2010</u>	<u>2009</u>
<b>Maintained Adherence to Medical Care (HRSA HAB measure)</b>	Percent of clients that maintain adherence to medical care visits within the measurement year (at least two medical visits with a provider with prescribing privileges at least three months apart within the measurement year).	75%	41%	77%	88%	na
<b>Stabilized CD4</b>	Percent of clients will have stabilized ( $\geq 200$ ) or increased their CD4 T-cell count from initial labs during the measurement period to final labs during the measurement period.	75%	100%	85%	94%	na
<b>Most Recent CD4 Stable</b>	Percent of clients with at least one CD4 T-cell count within the measurement year and those that are considered medically stable ( $CD4 \geq 200$ ).	75%	64%	85%	96%	na
<b>Undetectable Viral Load</b>	Percent of clients will have a viral load that remained undetectable or decreased to $\leq 50$ from initial labs during the measurement period to final labs during the measurement period.	75%	89%	73%	29%	na
<b>Most Recent Viral Load Undetectable</b>	Percent of clients with at least one viral load within the measurement year will be considered undetectable ( $< 50$ ).	75%	45%	66%	46%	na
<b>Improved Overall Health</b>	Percent of clients that report an improved overall health from the nutrition supplements they received (such as Boost, food vouchers) over the last 12 months.	75%	86%	68%	75%	na
<b>Decreases Symptoms</b>	Percent of clients will report that the nutrition therapy services (such as Boost, food vouchers, or meeting with the nutrition therapist) helped decrease any symptoms they have related to their HIV/AIDS status.	75%	79%	78%	70%	na
<b>Medical Nutrition Therapy</b>						
<b>Overall Program Performance Measures</b>						
<u>Heading</u>	<u>Definition</u>	<u>Goal</u>	<u>2012</u>	<u>2011</u>	<u>2010</u>	<u>2009</u>
<b>Client Satisfaction</b>	Percent of clients report being very satisfied or satisfied with medical nutrition therapy services received for their HIV/AIDS status over the last 12 months.	75%	88%	76%	89%	na
<b>Community Food Resources</b>	Percent of clients will report receiving a list of community food resources over the last 12 months.	75%	73%	60%	72%	na

### **Early Intervention Services**

Early intervention services include counseling individuals with respect to HIV/AIDS; testing (including tests to confirm the presence of the disease, to diagnose the extent of immune deficiency, and to provide information on appropriate therapeutic measures); referrals; other clinical and diagnostic services regarding HIV/AIDS; periodic medical evaluations for individuals with HIV/AIDS; and provision of therapeutic measures.

It should be noted that clients in EIS are generally not receiving any HIV/AIDS medication and therefore will generally have a very high viral load. The most recent undetectable viral load goal was nearly accomplished with 22% of clients having an undetectable viral load ( $< 50$ ) at their most recent labs within the measurement year.

<b>Early Intervention Services</b>						
<b>Agency Compliance Measures</b>						
<u>Heading</u>	<u>Definition</u>	<u>Goal</u>	<u>2012</u>	<u>2011</u>	<u>2010</u>	<u>2009</u>
<b>CD4 and Viral Load Documented</b>	Initial CD4 and Viral Load documented.	85%	<b>100%</b>	100%	na	na
<b>Early Intervention Services</b>						
<b>Client Level Outcome Measures</b>						
<u>Heading</u>	<u>Definition</u>	<u>Goal</u>	<u>2012</u>	<u>2011</u>	<u>2010</u>	<u>2009</u>
<b>In Medical Care</b>	Percent of clients that are in medical care (at least one medical visit per measurement period).	75%	<b>20%</b>	91%	100%	na
<b>Most Recent CD4 Stable</b>	Percent of clients with at least one CD4 T-cell count within the measurement year and those that are considered medically stable (CD4 ≥200).	50%	<b>80%</b>	79%	98%	na
<b>Most Recent Viral Load Undetectable</b>	Percent of clients with at least one viral load within the measurement year will be considered undetectable (<50). Note that these clients are entering care through EIS so they are not receiving any type of HIV/AIDS medication at this point-generally this number will be low.	25%	<b>22%</b>	22%	7%	na
<b>Early Intervention Services</b>						
<b>Overall Program Performance Measures</b>						
<u>Heading</u>	<u>Definition</u>	<u>Goal</u>	<u>2012</u>	<u>2011</u>	<u>2010</u>	<u>2009</u>
<b>HIV Test Results for PLWH/A</b>	Percent of individuals who test positive for HIV who are given their HIV antibody test results in the measurement year.	75%	<b>na</b>	na	na	na

## Mental Health Services

Many of the mental health service data indicators met or exceeded their respective goal with the exception of GAF (Global Assessment of Functioning) update and treatment plan update every 60 days, and discharge plan/note. It should be noted that 86% of clients report being satisfied or very satisfied with the mental health services they received, including group sessions. One hundred percent of clients enrolled in mental health service experienced an improved functional status throughout the course of their treatment denoted by an improved GAF rating.

<b>Mental Health Services</b>						
<b>Agency Compliance Measures</b>						
<u>Heading</u>	<u>Definition</u>	<u>Goal</u>	<u>2012</u>	<u>2011</u>	<u>2010</u>	<u>2009</u>
<b>Mental Health Screening</b>	Percent of clients will have a complete Mental Health screening performed and completed within their first three appointments with their Mental Health provider.	80%	<b>89%</b>	100%	68%	60%
<b>DSM IV Diagnosis</b>	Percent of clients will have a DSM IV diagnosis documented on intake or completed no later than within the first three appointments with their Mental Health provider.	80%	<b>100%</b>	100%	83%	na
<b>GAF Rating</b>	Percent of clients will have a GAF rating documented on intake or completed and documented no later than within the first three appointments with their Mental Health provider.	80%	<b>89%</b>	94%	69%	na
<b>Treatment Plan</b>	Percent of clients in individual treatment will have a treatment plan documented on intake or completed no later than within the first three appointments with the mental health provider.	80%	<b>83%</b>	88%	60%	na
<b>GAF Update</b>	Percent of clients will have an updated GAF rating documented at a minimum of every 60 days.	80%	<b>61%</b>	81%	77%	55%
<b>Progress Notes</b>	Percent of clients will have progress notes documented at each of their appointments throughout treatment in the measurement year.	80%	<b>100%</b>	100%	100%	na
<b>Treatment Plan</b>	Percent of clients in individual treatment will have their treatment plan revised and updated at a minimum of every 60 days while the client is in Mental Health treatment.	80%	<b>56%</b>	63%	77%	58%
<b>Biopsychosocial</b>	Percent of clients in individual treatment that have a Biopsychosocial document within their first three appointments with their Mental Health Provider.	80%	<b>89%</b>	94%	na	na
<b>Discharge Plan/Note</b>	Percent of clients exiting Mental Health services will have a discharge plan completed no later than 90 days from the client's last contact/appointment with the service provider.	95%	<b>55%</b>	100%	100%	na

<b>Mental Health Services</b>						
<b>Client Level Outcome Measures</b>						
<u>Heading</u>	<u>Definition</u>	<u>Goal</u>	<u>2012</u>	<u>2011</u>	<u>2010</u>	<u>2009</u>
<b>Maintained Adherence to Medical Care (HRSA HAB measure)</b>	Percent of clients that maintain adherence to medical care visits within the measurement year (at least two medical visits with a provider with prescribing privileges at least three months apart within the measurement year).	75%	<b>49%</b>	79%	78%	na
<b>Improved Functional Status</b>	Percent of clients will have an increased GAF rating from initial GAF to GAF at discharge or final GAF rating within the measurement period if client is still accessing services.	55%	<b>100%</b>	77%	78%	67%
<b>Stabilized CD4</b>	Percent of clients will have stabilized ( $\geq 200$ ) or increased their CD4 T-cell count from initial labs during the measurement period to final labs during the measurement period.	75%	<b>87%</b>	71%	71%	na
<b>Most Recent CD4 Stable</b>	Percent of clients with at least one CD4 T-cell count within the measurement year and those that are considered medically stable ( $CD_4 \geq 200$ ).	75%	<b>87%</b>	74%	78%	na
<b>Undetectable Viral Load</b>	Percent of clients will have a viral load that remained undetectable or decreased to $\leq 50$ from initial labs during the measurement period to final labs during the measurement period.	75%	<b>84%</b>	61%	86%	na
<b>Most Recent Viral Load Undetectable</b>	Percent of clients with at least one viral load within the measurement year will be considered undetectable ( $< 50$ ).	75%	<b>49%</b>	61%	57%	na
<b>Mental Health Services</b>						
<b>Overall Program Performance Measures</b>						
<u>Heading</u>	<u>Definition</u>	<u>Goal</u>	<u>2012</u>	<u>2011</u>	<u>2010</u>	<u>2009</u>
<b>Client Satisfaction</b>	Percent of clients will report being very satisfied or satisfied with the Mental Health services (including group sessions) they received over the last 12 months.	75%	<b>82%</b>	82%	88%	na
<b>Retention in Care- Individual Sessions</b>	Percent of clients entering the care system at least 90 days prior to the end of the measurement year will remain in care for at least three appointments within the measurement year.	55%	<b>84%</b>	54%	63%	67%

### **Substance Abuse Services (Outpatient)**

Substance abuse services had a very high level of client satisfaction, 89%, in 2012 in addition to a very high retention rate of 82%. However, some deficiencies were noted regarding GAF updates, treatment plan updates and discharge planning. As with mental health services clients should have an updated GAF score and treatment plan every 60 days. Clients should also have a discharge plan or note no later than 90 days from the last point of contact with the client. Regarding the client level outcomes, only 53% of clients had a viral load that decreased or remained undetectable from initial to final labs during the measurement period. Consequently only 47% of clients had an undetectable viral load at their final labs within the measurement period. This indicates a very low medication compliance rate.

These figures are being assessed by the quality management team and in collaboration they will be working with substance abuse providers to increase agency compliance indicators and client level health outcome measure in the future. Any projects surrounding this service category will be discussed in subsequent reports.

<b>Substance Abuse Services</b>						
<b>Agency Compliance Measures</b>						
<u>Heading</u>	<u>Definition</u>	<u>Goal</u>	<u>2012</u>	<u>2011</u>	<u>2010</u>	<u>2009</u>
<b>Mental Health Screening</b>	Percent of clients will have a complete Mental Health screening performed and completed within their first three appointments with their Substance Abuse provider.	75%	<b>71%</b>	94%	94%	na
<b>GAF Raiting</b>	Percent of clients will have a GAF rating documented on intake or completed and documented no later than within the first three appointments with their Substance Abuse provider.	80%	<b>62%</b>	100%	91%	na
<b>Treatment Plan</b>	Percent of clients in individual treatment will have a treatment plan documented on intake or completed no later than within the first three appointments with the Substance Abuse provider.	80%	<b>95%</b>	100%	85%	67%
<b>GAF Update</b>	Percent of clients will have an updated GAF rating documented at a minimum of every 60 days.	80%	<b>43%</b>	100%	73%	80%
<b>Progress Notes</b>	Percent of clients will have progress notes documented at each of their appointments throughout treatment in the measurement year.	80%	<b>90%</b>	100%	100%	na
<b>Treatment Plan</b>	Percent of clients in individual treatment will have their treatment plan revised and updated at a minimum of every 60 days while the client is in Substance Abuse treatment.	80%	<b>52%</b>	88%	69%	na
<b>Biopsychosocial</b>	Percent of clients in individual treatment that have a Biopsychosocial document within their first three appointments with their Substance Abuse Provider.	80%	<b>86%</b>	94%	na	na
<b>Discharge Plan/Note</b>	Percent of clients exiting Substance abuse services will have a discharge plan completed no later than 90 days from the client's last contact/appointment with the service provider.	95%	<b>55%</b>	100%	100%	na
<b>Substance Abuse Services</b>						
<b>Client Level Outcome Measures</b>						
<u>Heading</u>	<u>Definition</u>	<u>Goal</u>	<u>2012</u>	<u>2011</u>	<u>2010</u>	<u>2009</u>
<b>Maintained Adherence to Medical Care (HRSA HAB measure)</b>	Percent of clients that maintain adherence to medical care visits within the measurement year (at least two medical visits with a provider with prescribing privileges at least three months apart within the measurement year).	75%	<b>39%</b>	68%	75%	na
<b>Improved Functional Status</b>	Percent of clients will have an increased GAF rating from initial GAF to GAF at discharge or final GAF rating within the measurement period if client is still accessing services.	55%	<b>100%</b>	76%	59%	75%
<b>Stabilized CD4</b>	Percent of clients will have stabilized ( $\geq 200$ ) or increased their CD4 T-cell count from initial labs during the measurement period to final labs during the measurement period.	75%	<b>85%</b>	88%	83%	na
<b>Most Recent CD4 Stable</b>	Percent of clients with at least one CD4 T-cell count within the measurement year and those that are considered medically stable ( $CD4 \geq 200$ ).	75%	<b>85%</b>	85%	67%	na
<b>Undetectable Viral Load</b>	Percent of clients will have a viral load that remained undetectable or decreased to $\leq 50$ from initial labs during the measurement period to final labs during the measurement period.	75%	<b>53%</b>	92%	75%	na
<b>Most Recent Viral Load Undetectable</b>	Percent of clients with at least one viral load within the measurement year will be considered undetectable ( $< 50$ ).	75%	<b>47%</b>	76%	67%	na
<b>Substance Abuse Services</b>						
<b>Overall Program Performance Measures</b>						
<u>Heading</u>	<u>Definition</u>	<u>Goal</u>	<u>2012</u>	<u>2011</u>	<u>2010</u>	<u>2009</u>
<b>Client Satisfaction</b>	Percent of clients will report being very satisfied or satisfied with the Substance Abuse services (including group sessions) they received over the last 12 months.	75%	<b>89%</b>	89%	86%	na
<b>Retention in Care- Individual Sessions</b>	Percent of clients entering the care system at least 90 days prior to the end of the measurement year will remain in care for at least three appointments within the measurement year.	55%	<b>82%</b>	73%	77%	80%



## Oral Health Care

HRSA has released several performance measure that will be tracked during grant year 2013-2014 and going forward. These will be discussed in subsequent reports. During 2012 79% of clients indicated a high level of satisfaction with oral health care services received.

Oral Health Care						
Overall Program Performance Measures						
Heading	Definition	Goal	2012	2011	2010	2009
Client Satisfaction	Percent of clients will report being very satisfied or satisfied with the Oral Health Care (Dental visits) they received in the last 12 months through the Ryan White Program.	75%	79%	62%	na	na

## SUPPORT SERVICES

### Medical Transportation Assistance

Three out five client level outcomes measures met their respective goals. Most recent undetectable viral load was deficient at 46% and maintained adherence to care also deficient at 42%. Overall 77% of clients reported a high level of satisfaction with transportation services. This is down from 2010 at 89% and 2011 at 87%. This could be due to the more stringent regulations surrounding the use of this service category over the past few years per the direction of HRSA as it must be linked to a medical outcome. Therefore, each use of a bus pass must be tracked and accounted for to ensure they are utilized for medical purposes only. Some clients may find this extra work cumbersome which could indicate the slight drop in consumer satisfaction.

Medical Transportation Assistance						
Client Level Outcome Measures						
Heading	Definition	Goal	2012	2011	2010	2009
Maintained Adherence to Medical Care (HRSA HAB measure)	Percent of clients that maintain adherence to medical care visits within the measurement year (at least two medical visits with a provider with prescribing privileges at least three months apart within the measurement year).	75%	42%	77%	80%	na
Stabilized CD4	Percent of clients will have stabilized ( $\geq 200$ ) or increased their CD4 T-cell count from initial labs during the measurement period to final labs during the measurement period.	75%	91%	86%	94%	na
Most Recent CD4 Stable	Percent of clients with at least one CD4 T-cell count within the measurement year and those that are considered medically stable ( $CD4 \geq 200$ ).	75%	78%	86%	91%	na
Undetectable Viral Load	Percent of clients will have a viral load that remained undetectable or decreased to $\leq 50$ from initial labs during the measurement period to final labs during the measurement period.	75%	73%	72%	76%	na
Most Recent Viral Load Undetectable	Percent of clients with at least one viral load within the measurement year will be considered undetectable ( $< 50$ ).	75%	46%	68%	57%	na
Medical Transportation Assistance						
Overall Program Performance Measures						
Heading	Definition	Goal	2012	2011	2010	2009
Client Satisfaction	Percent of clients that report being very satisfied or satisfied with the transportation services they received over the last 12 months	75%	77%	87%	89%	na

<b>Medical Transportation Assistance</b>						
<b>Agency Compliance Measures</b>						
<u>Heading</u>	<u>Definition</u>	<u>Goal</u>	<u>2012</u>	<u>2011</u>	<u>2010</u>	<u>2009</u>
<b>Eligible Utilization of Bus Pass</b>	Percent of Medical Transportation service encounters for bus pass utilization will have documentation in the client file of eligible appointment/utilization with proof of service/appointment received.	95%	<b>89%</b>	100%	na	na
<b>Eligible Utilization of Van Transportation</b>	Percent of Medical Transportation service van encounters will have documentation in CAREWare corresponding to the date of service on the provider log for all Medical Transportation service van encounters.	95%	<b>100%</b>	100%	na	na
<b>Van Transportation Requirements Met</b>	Percent of Medical Transportation service van transportation specific contract requirements will be submitted to the Grantee at the end of the grant year.	100%	<b>100%</b>	100%	na	na

### **Food Bank/Home-Delivered Meals**

Client satisfaction survey reports that 88% of clients were satisfied or very satisfied with this service.

<b>Food Bank/Food Voucher</b>						
<b>Agency Compliance Measures</b>						
<u>Heading</u>	<u>Definition</u>	<u>Goal</u>	<u>2012</u>	<u>2011</u>	<u>2010</u>	<u>2009</u>
<b>none</b>						
<b>Food Bank/Food Voucher</b>						
<b>Client Level Outcome Measures</b>						
<u>Heading</u>	<u>Definition</u>	<u>Goal</u>	<u>2012</u>	<u>2011</u>	<u>2010</u>	<u>2009</u>
<b>Maintained Adherence to Medical Care (HRSA HAB measure)</b>	Percent of clients that maintain adherence to medical care visits within the measurement year (at least two medical visits with a provider with prescribing privileges at least three months apart within the measurement year).	75%	<b>41%</b>	77%	64%	na
<b>Stabilized CD4</b>	Percent of clients will have stabilized ( $\geq 200$ ) or increased their CD4 T-cell count from initial labs during the measurement period to final labs during the measurement period.	75%	<b>100%</b>	75%	93%	na
<b>Most Recent CD4 Stable</b>	Percent of clients with at least one CD4 T-cell count within the measurement year and those that are considered medically stable ( $CD4 \geq 200$ ).	75%	<b>64%</b>	88%	95%	na
<b>Undetectable Viral Load</b>	Percent of clients will have a viral load that remained undetectable or decreased to $\leq 50$ from initial labs during the measurement period to final labs during the measurement period.	75%	<b>89%</b>	71%	54%	na
<b>Most Recent Viral Load Undetectable</b>	Percent of clients with at least one viral load within the measurement year will be considered undetectable ( $< 50$ ).	75%	<b>45%</b>	68%	69%	na
<b>Food Bank/Food Voucher</b>						
<b>Overall Program Performance Measures</b>						
<u>Heading</u>	<u>Definition</u>	<u>Goal</u>	<u>2012</u>	<u>2011</u>	<u>2010</u>	<u>2009</u>
<b>Client Satisfaction</b>	Percent of clients will report being very satisfied or satisfied with the Food Services (for food vouchers) they received in the last 12 months through the Ryan White Program.	75%	<b>88%</b>	73%	na	na

### **Emergency Financial Assistance**

Percentages of housing assistance paid within 7 days and utility assistance paid within 48 hours increased substantially from 2010 to 2011, both now at 100%. Additionally, those clients that maintained adherence to medical are also increased by 8%. Unfortunately client satisfaction with this service decreased slightly which could indicate more education is needed for clients on allowable costs for this service.

<b>Emergency Financial Assistance</b>						
<b>Agency Compliance Measures</b>						
<u>Heading</u>	<u>Definition</u>	<u>Goal</u>	<u>2012</u>	<u>2011</u>	<u>2010</u>	<u>2009</u>
<b>Documentation of Denial From at Least Three Other Resources</b>	Percent of clients receiving EFA will have a planning session documented in the case notes that at least three other community resources were approached for emergency assistance prior to EFA being issued. This must include the name of the community resource/agency, date contacted, and reason for denial.	80%	<b>100%</b>	100%	na	na
<b>Request Paid Within 7 Days-Housing Assistance</b>	Percent of clients receiving Housing assistance will have documentation that the request was paid 7 days after the approved request.	75%	<b>92%</b>	100%	82%	na
<b>Request Paid Within 48 Hours-Utility Assistance</b>	Percent of clients receiving EFA will have documentation that the request was paid 48 hours after the approved request.	75%	<b>79%</b>	93%	88%	na

<b>Emergency Financial Assistance</b>						
<b>Client Level Outcome Measures</b>						
<u>Heading</u>	<u>Definition</u>	<u>Goal</u>	<u>2012</u>	<u>2011</u>	<u>2010</u>	<u>2009</u>
<b>Maintained Adherence to Medical Care (HRSA HAB measure)</b>	Percent of clients that maintain adherence to medical care visits within the measurement year (at least two medical visits with a provider with prescribing privileges at least three months apart within the measurement year).	75%	<b>51%</b>	81%	73%	na
<b>Stabilized CD4</b>	Percent of clients will have stabilized ( $\geq 200$ ) or increased their CD4 T-cell count from initial labs during the measurement period to final labs during the measurement period.	75%	<b>87%</b>	86%	84%	na
<b>Most Recent CD4 Stable</b>	Percent of clients with at least one CD4 T-cell count within the measurement year and those that are considered medically stable ( $CD4 \geq 200$ ).	75%	<b>89%</b>	83%	75%	na
<b>Undetectable Viral Load</b>	Percent of clients will have a viral load that remained undetectable or decreased to $\leq 50$ from initial labs during the measurement period to final labs during the measurement period.	75%	<b>50%</b>	54%	63%	na
<b>Most Recent Viral Load Undetectable</b>	Percent of clients with at least one viral load within the measurement year will be considered undetectable ( $< 50$ ).	75%	<b>48%</b>	54%	52%	na
<b>Received Resource Directory</b>	Percent of clients will report having received a list of community resources at least once per year.	65%	<b>58%</b>	58%	74%	na

<b>Emergency Financial Assistance</b>						
<b>Overall Program Performance Measures</b>						
<u>Heading</u>	<u>Definition</u>	<u>Goal</u>	<u>2012</u>	<u>2011</u>	<u>2010</u>	<u>2009</u>
<b>Client Satisfaction</b>	Percent of clients will report being very satisfied or satisfied with the Emergency Financial Assistance (for utilities and housing) they received in the last 12 months through the Ryan White Program.	75%	<b>65%</b>	62%	83%	na

## Housing Services

Clients CD4 and viral load stability have dropped since 2010 in addition to client satisfaction. The Quality Management team will look into the labs issue in addition to the consumer satisfaction score that dropped 21%. It could be related to client's knowledge of housing service provisions.

<b>Housing Services</b>						
<b>Agency Compliance Measures</b>						
<u>Heading</u>	<u>Definition</u>	<u>Goal</u>	<u>2012</u>	<u>2011</u>	<u>2010</u>	<u>2009</u>
<b>Documentation of Denial From at Least Three Other Resources</b>	Percent of clients receiving EFA will have a planning session documented in the case notes that at least three other community resources were approached for emergency assistance prior to EFA being issued. This must include the name of the community resource/agency, date contacted, and reason for denial.	80%	<b>89%</b>	100%	na	na
<b>Request Paid Within 7 Days-Housing Assistance</b>	Percent of clients receiving Housing assistance will have documentation that the request was paid 7 days after the approved request.	75%	<b>93%</b>	80%	86%	na

<b>Housing Services</b>						
<b>Client Level Outcome Measures</b>						
<u>Heading</u>	<u>Definition</u>	<u>Goal</u>	<u>2012</u>	<u>2011</u>	<u>2010</u>	<u>2009</u>
<b>Maintained Adherence to Medical Care (HRSA HAB measure)</b>	Percent of clients that maintain adherence to medical care visits within the measurement year (at least two medical visits with a provider with prescribing privileges at least three months apart within the measurement year).	75%	<b>55%</b>	50%	50%	na
<b>Stabilized CD4</b>	Percent of clients will have stabilized ( $\geq 200$ ) or increased their CD4 T-cell count from initial labs during the measurement period to final labs during the measurement period.	75%	<b>87%</b>	67%	100%	na
<b>Most Recent CD4 Stable</b>	Percent of clients with at least one CD4 T-cell count within the measurement year and those that are considered medically stable ( $CD_4 \geq 200$ ).	75%	<b>75%</b>	67%	75%	na
<b>Undetectable Viral Load</b>	Percent of clients will have a viral load that remained undetectable or decreased to $\leq 50$ from initial labs during the measurement period to final labs during the measurement period.	75%	<b>55%</b>	25%	100%	na
<b>Most Recent Viral Load Undetectable</b>	Percent of clients with at least one viral load within the measurement year will be considered undetectable ( $< 50$ ).	75%	<b>46%</b>	50%	50%	na
<b>Received Resource Directory</b>	Percent of clients will report having received a list of community resources at least once per year.	65%	<b>74%</b>	57%	74%	na
<b>Housing Services</b>						
<b>Overall Program Performance Measures</b>						
<u>Heading</u>	<u>Definition</u>	<u>Goal</u>	<u>2012</u>	<u>2011</u>	<u>2010</u>	<u>2009</u>
<b>Client Satisfaction</b>	Percent of clients will report being very satisfied or satisfied with the Housing Services they received in the last 12 months through the Ryan White Program.	75%	<b>80%</b>	62%	83%	na

## Health Education/Risk Reduction

Health Education/Risk Reduction services were received well by clients with 87% indicating a high level of satisfaction with this service. Additionally percentages were exceeded within all client level outcome measures.

<b>Health Education/Risk Reduction Services</b>						
<b>Agency Compliance Measures</b>						
<u>Heading</u>	<u>Definition</u>	<u>Goal</u>	<u>2012</u>	<u>2011</u>	<u>2010</u>	<u>2009</u>
<b>none</b>						
<b>Health Education/Risk Reduction Services</b>						
<b>Client Level Outcome Measures</b>						
<u>Heading</u>	<u>Definition</u>	<u>Goal</u>	<u>2012</u>	<u>2011</u>	<u>2010</u>	<u>2009</u>
<b>Maintained Adherence to Medical Care (HRSA HAB measure)</b>	Percent of clients that maintain adherence to medical care visits within the measurement year (at least two medical visits with a provider with prescribing privileges at least three months apart within the measurement year).	75%	<b>39%</b>	93%	88%	na
<b>Stabilized CD4</b>	Percent of clients will have stabilized ( $\geq 200$ ) or increased their CD4 T-cell count from initial labs during the measurement period to final labs during the measurement period.	75%	<b>100%</b>	93%	94%	na
<b>Most Recent CD4 Stable</b>	Percent of clients with at least one CD4 T-cell count within the measurement year and those that are considered medically stable ( $CD_4 \geq 200$ ).	75%	<b>88%</b>	93%	93%	na
<b>Undetectable Viral Load</b>	Percent of clients will have a viral load that remained undetectable or decreased to $\leq 50$ from initial labs during the measurement period to final labs during the measurement period.	75%	<b>92%</b>	78%	79%	na
<b>Most Recent Viral Load Undetectable</b>	Percent of clients with at least one viral load within the measurement year will be considered undetectable ( $< 50$ ).	75%	<b>55%</b>	78%	86%	na

<b>Health Education/Risk Reduction Services</b>						
<b>Overall Program Performance Measures</b>						
<u>Heading</u>	<u>Definition</u>	<u>Goal</u>	<u>2012</u>	<u>2011</u>	<u>2010</u>	<u>2009</u>
<b>Client Satisfaction</b>	Percent of clients that report being satisfied or very satisfied with the health education/risk reduction services (lunch and learn classes, healthy relation classes) they have received for their HIV status over the past 12 months.	75%	<b>87%</b>	87%	na	na

### **Linguistic Services**

Although this service category is not specifically funded through an agency all agencies have bi-lingual staff or the capability to use translation services. Clients indicated a very high level of satisfaction with being able to receive services and communicate with staff in their native language.

<b>Linguistic Services</b>						
<b>Overall Program Performance Measures</b>						
<u>Heading</u>	<u>Definition</u>	<u>Goal</u>	<u>2012</u>	<u>2011</u>	<u>2010</u>	<u>2009</u>
<b>Client Satisfaction</b>	Percent of clients that report being very satisfied or satisfied with the language and interpretation services they received in the last 12 months through the Ryan White Program.	75%	95%	97%	na	na

## **OVERALL CLIENT LEVEL OUTCOMES AND PROGRAM PERFORMANCE**

According to the consumer satisfaction survey 88% of our clients reported being very satisfied or satisfied with the overall quality of care and services received for their HIV/AIDS status over the last 12 months, exceeding our goal of 75%. This indicates a very high level of satisfaction overall with Ryan White services in the TGA.