

Minutes

**BOARD OF DIRECTORS
PROGRAM & PERFORMANCE IMPROVEMENT
COMMITTEE MEETING
July 9, 2024**



PARTICIPANTS:

- ☒ Stuart Levine, Co-Chair
- ☒ Debony Hughes, Co-Chair
- ☐ Chelsea King Arthur

- ☒ Athena Haniotis
- ☐ Crista Taylor
- ☒ Jannae White

Staff:

- ☒ Tolu Thomas
- ☒ Laura Garcia
- ☐ Margaret Flanagan

- ☒ Lisa Hoffmann
- ☒ Lawanda Williams
- ☐ Other

I. Discussion of Committee Meeting Time (T. Thomas)

Staff requests that the Committee meet during business hours. T. Thomas will send out a Doodle poll to committee members to explore this option.

II. Recognition of Von Bradshaw

Von was the executive assistant at HCH for 30 years and passed away last week. It was a huge loss to HCH and the community. There is a memorial outside of her office. Information about her funeral will be shared with the Board and Committees. We will all miss her warmth and her talent. She was a constant source of information and support for Board members.

III. Q2 Clinical Quality Measures (L. Hoffmann and T. Thomas)

Everyone deserves to go home.

Maternal and Child Health	Q1 2024	Q2 2024	2024 Goal
Dental Sealants (ages 6-9 Years)	-	Data Pending	95%
Low Birthweight	-	5%	<5%
Wt assessment & counseling for nutrition & PA (Peds)	76%	73%	83%

Disease Management	Q1 2024	Q2 2024	2024 Goal
IVD: Use of Aspirin/Other Antiplatelet	84%	84%	87%
Statin Therapy for Prevention/Treatment of CVD	86%	84%	88%
HIV Linkage to Care	80% (4/5)	83% (5/6)	100%
Depression Remission at Twelve Months	5%	4%	9%

Screening and Preventive Care Measures	Q1 2024	Q2 2024	2024 Goal
Height and Weight Assessment and Health Counseling	44%	44%	50%
Breast Cancer Screening	39%	40%	47%
Cervical cancer screening	53%	51%	59%
Depression Screening and Follow-Up Plan	39%	44%	52%
HIV Screening	75%	75%	80%
Tobacco use: screening and cessation intervention	69%	70%	75%

Chronic Disease Management	Q1 2024	Q2 2024	2024 Goal
Controlling high blood pressure	61%	61%	66%
Diabetes: HbA1c poor control (>9%) [inverse]	34%	35%	27%

Additional HCH Priorities	Q1 2024	Q2 2024	2024 Goal
Lab Notifications	40%	39%	60%
Referral Tracking (% complete)	24%	23%	40%
SDH Ask Rate	47%	40%	70%
FLU: adult vaccination rates	28%	N/A	40%
Suicide assessment follow-up	10%	15%	TBD
Prescribing antibiotics for URI and acute bronchitis	95%	96%	100%
Hospitalization Follow Up	62%	60%	65%

- A. Diabetes control measure: Changes to the cost of injectables have negatively impacted prescribing habits and this has potentially impacted this measure in Q2.
- i. In last 12-18 months the cost of injectables within the GLP class of drugs have increased *significantly*, making them unaffordable for the agency. For example, weekly dose medications can be between \$200-\$300 per month. We discovered that we had lost tens of thousands of dollars each month because we had not realized that the cost had shot up and, simultaneously, we had been encouraging patients to treat their diabetes.

- ii. Victoza (a once-daily injectable) is still affordable for us; however, there have been times over the last six months when it has become unavailable due to a national shortage.
- iii. Progress on this measure that had been made through weekly dosing and decreased pill burden has been undercut for uninsured and uninsurable clients because we've had to take them off of GLP-1 medications.
- iv. We do have access to SGLT-2 medications and will continue to prescribe those.
- v. We can still prescribe GLP-1 medications for insured clients, but that is a minority of the people we serve.
- vi. We are keeping a close eye on this matter because it's a significant concern and we will keep the committee posted.

IV. Q2 PI Measures

Disease Management	Q1 2024	Q2 2024	2024 Goal
Colorectal Cancer Screening	30%	30%	40%
Hypertension Disparities*	Black M: 63% Black F: 55% White M: 71% White F: 68% Latino M: 63% Latina F: 64%	Black M: 62% Black F: 52% White M: 71% White F: 72% Latino M: 64% Latina F: 67%	Less than 5% disparity
Childhood Vaccinations	0%	9% YTD	18%
PHQ-9 Questions 1 and 6	2.24%	3.96%	10%
Diabetes and A1c Control* (inverse measure)	Hispanic/Latinx 41%	38%	27% (reduce disparity by 5% for Hispanic/Latinx clients)

- A. **Childhood vaccinations:** This measure is now being tracked “year to date” to more accurately reflect progress

Disease Management	Q1 2024	Q2 2024	2024 Goal
Clients receiving PrEP*	23 clients	44 clients	36 clients
Prenatal Early Entry to Care	57%	66%	70%
Appointment Access*	Med Urgent: 73% Med Routine: 86% BH Urgent: 77% BH Routine: 77% Dental Urgent: 66% Dental Routine: 100%	Med Urgent: 75% Med Routine: 85% BH Urgent: 100% BH Routine: 100% Dental Urgent: 100% Dental Routine: 100%	Med Urgent: 71% Med Routine: 100% BH Urgent: 80% BH Routine: 80% Dental Urgent: 71% Dental Routine: 100%
Hospital Readmission Rate	15%	Data Pending	<20%
Closing the Referral Loop	24%	23%	40%

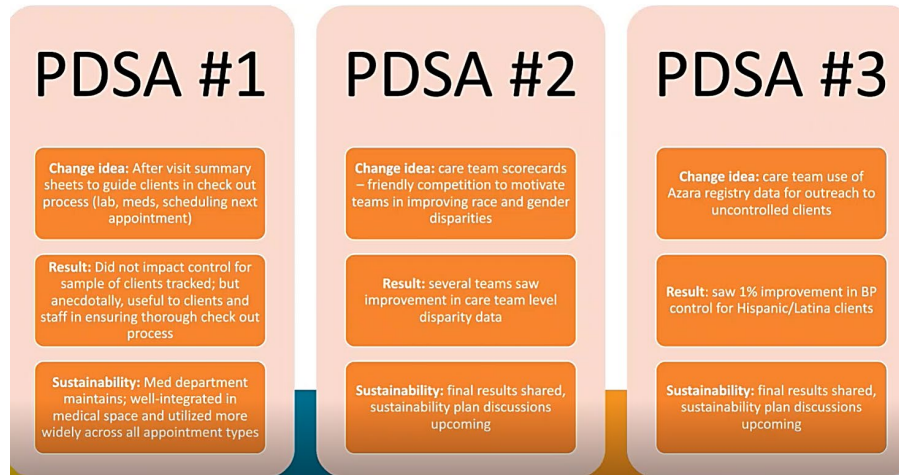
- B. **Clients receiving PrEP:** Surpassed goal this year.

- C. **Appointment Access:** Surpassing goals set for BH Urgent and Routine Care, as well as Dental Routine Care

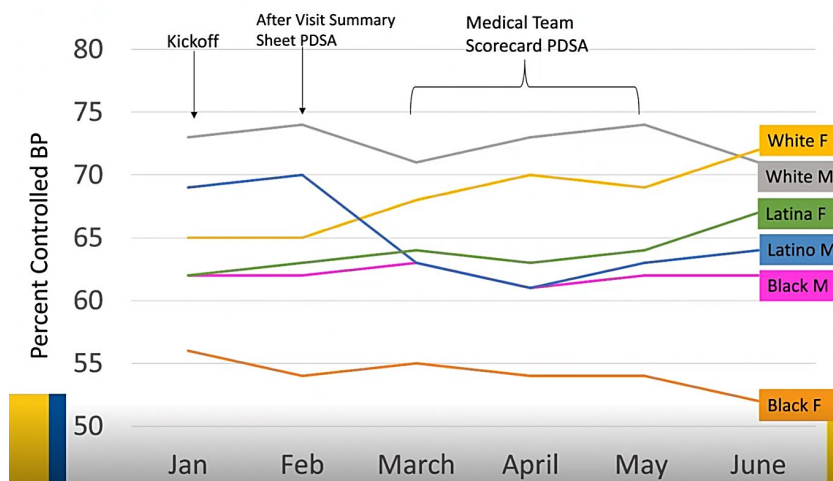
V. **Q2 PI Subcommittee Updates**

A. **Hypertension Disparities**

i. **PDSA Results:**



ii. **Results from First Half of Year:**



iii. **Next Steps for Subcommittee**

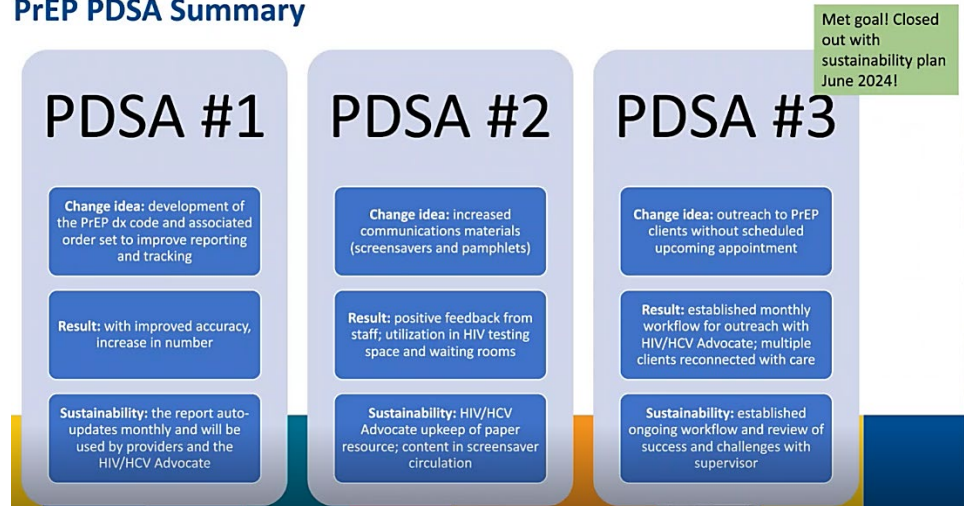
- Looked at data for Black/African American women with hypertension and conducted a comparison of factors between controlled and uncontrolled BP populations.
- Recent UDS change means that client at-home readings can satisfy the measure. S/c will be looking at improving

distribution of BP devices and client education on proper usage.

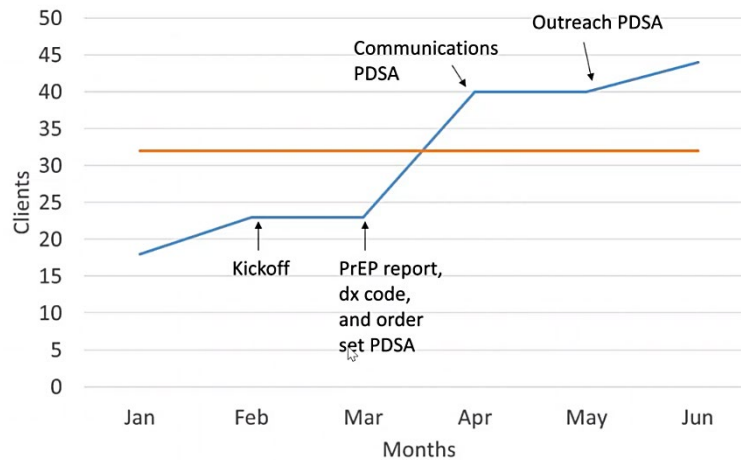
B. PrEP

i. PDSA Results:

PrEP PDSA Summary



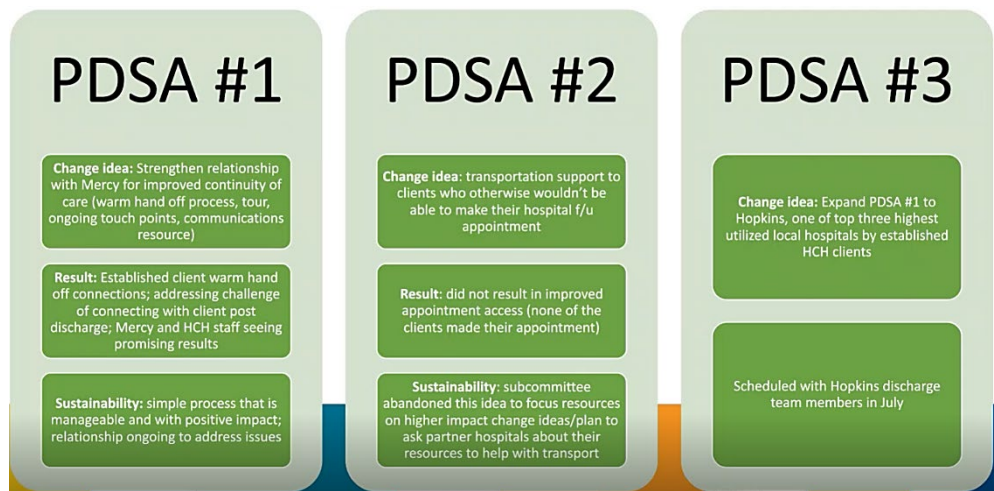
ii. Results from First Half of Year:



iii. Subcommittee has been disbanded.

C. Hospital Readmission

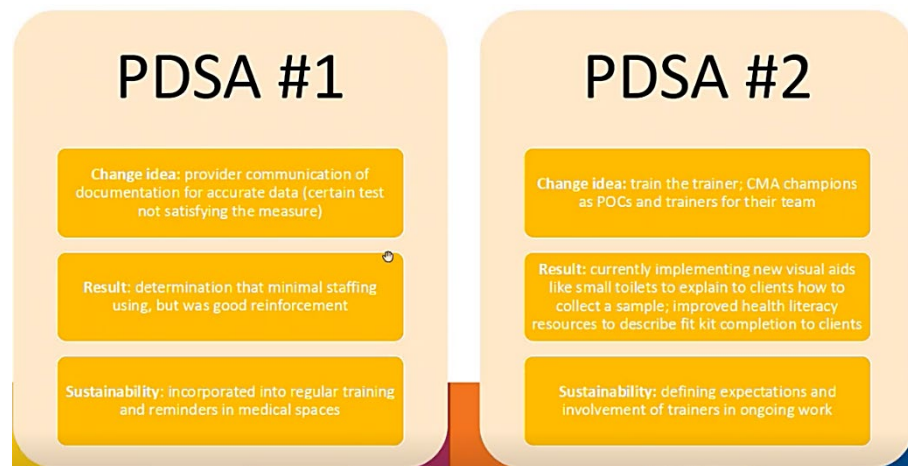
- i. This measure has not changed due to changes in CRISP reporting.
- ii. PDSA Summary:



- iii. We are writing a HRSA grant for expansion of clinic hours to weekends and evenings at the Baltimore County clinic which could increase the same-day resources available to partners at the Medstar Franklin Square Medical Center ED.

D. Colorectal Cancer Screening

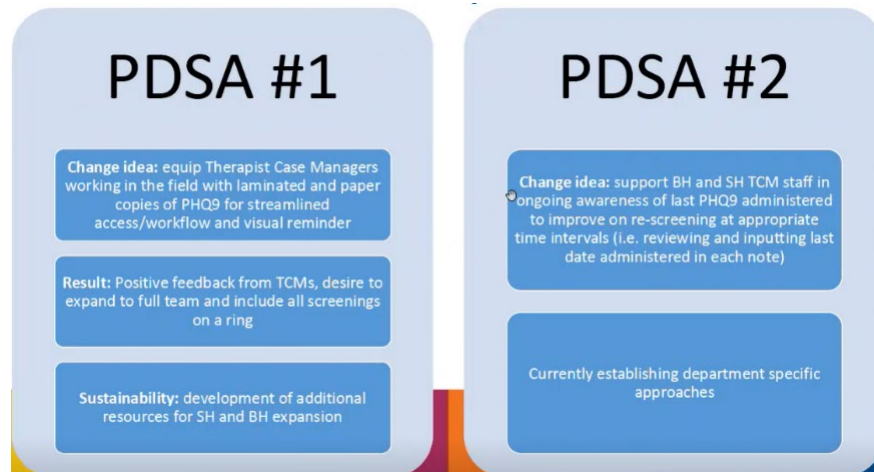
- i. This measure has not changed since January.
- ii. PDSA Results:



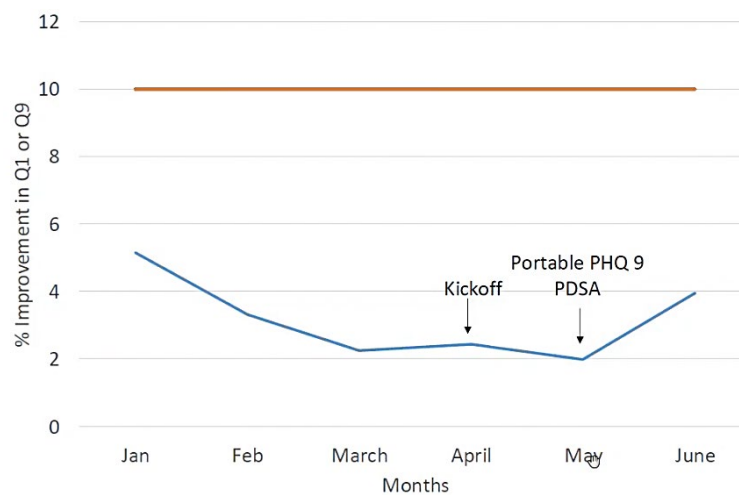
- iii. During Colorectal Screening Month (March) we realized that there were breakdowns in our process, so our goal is now to close those gaps.

E. Depression Remission (PHQ-9 Questions 1&6)

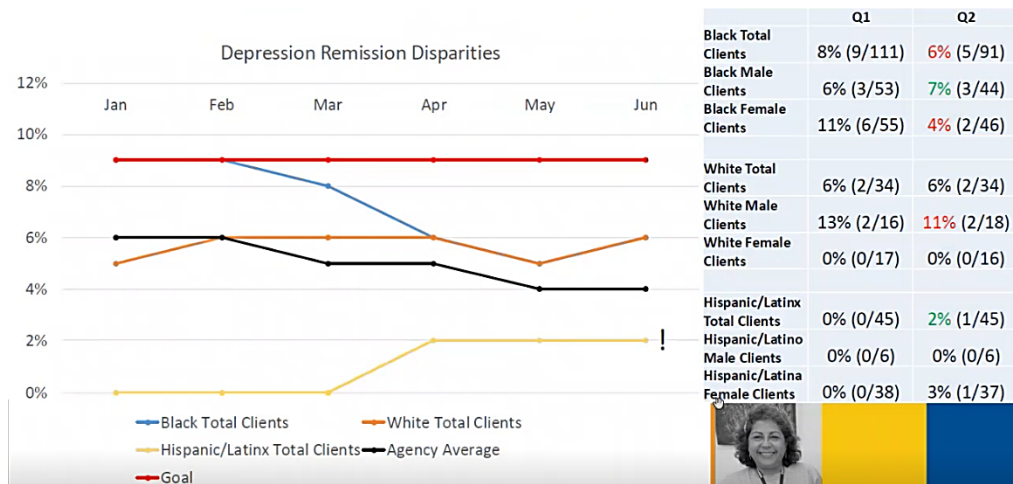
- i. PDSA Results:



ii. Results from First Half of Year:

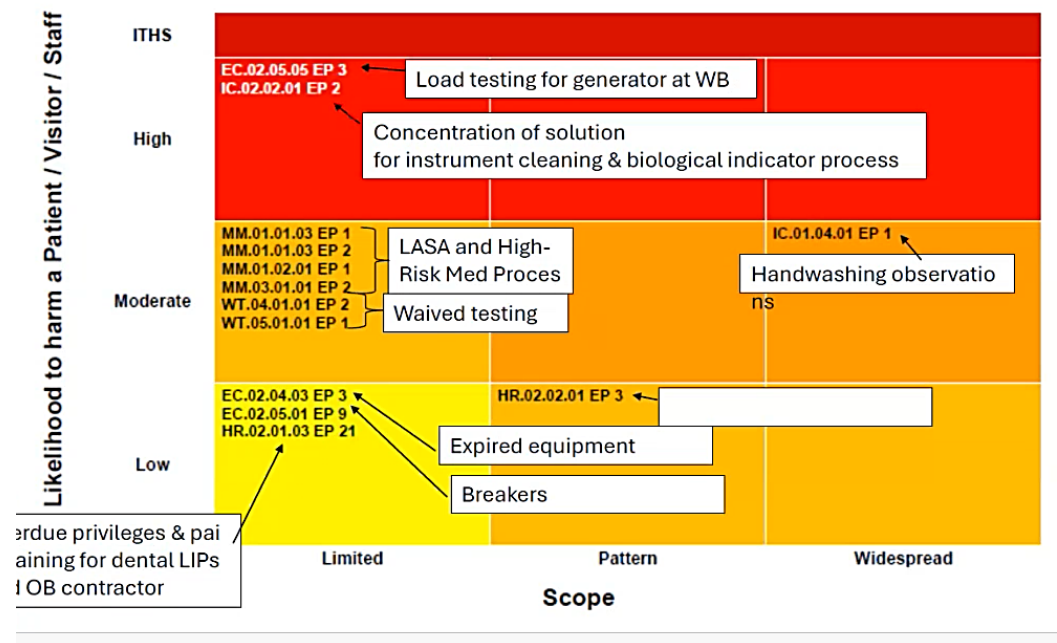


iii. Disparities by race and ethnicity:

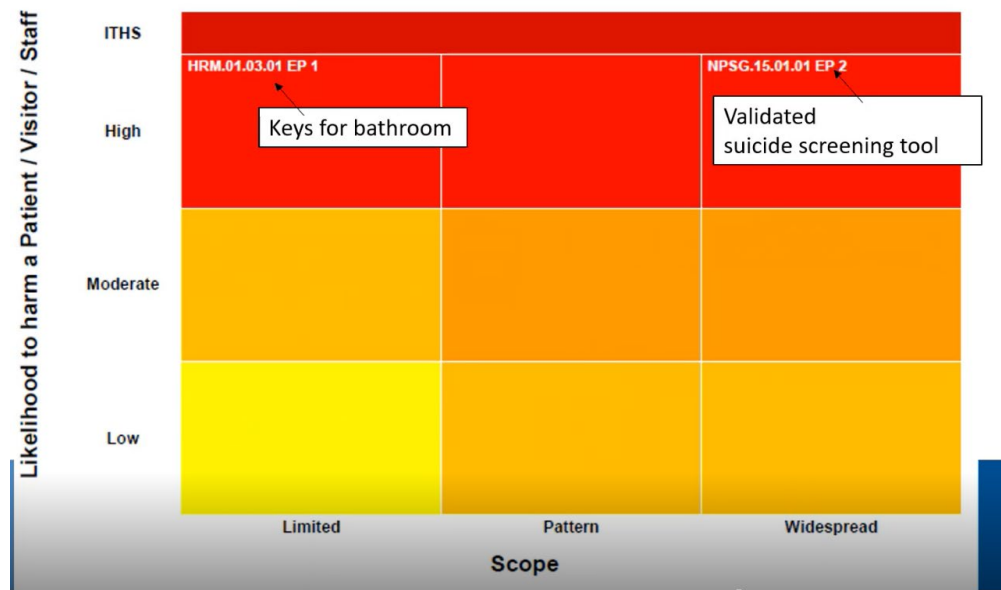


VI. June 2024 Joint Commission Visit

A. Ambulatory Program: 13 Findings



B. Behavioral Health Care and Human Services Program: 2 Findings



C. Primary Medical Home: No Findings

- D. In sum: We had minimal findings and we expect to have all findings corrected within 30 days.

VII. Credentialing & Privileging

- A. *L. Williams left the meeting during discussion of her reprivileging.*
- B. Reprivileging recommended by L. Garcia: Tyler Gray, MD
- C. Reprivileging recommended by L. Garcia: Iris Leviner, MD
- D. Reprivileging recommended by L. Garcia: Lawanda Williams, LCSW-C

ACTION ITEM: Committee members reviewed the three candidates. Follow-Up Topics: none. **By unanimous vote, the three candidates were approved for requested privileges by the committee members in attendance.**

- E. *L. Garcia left the meeting during discussion of her reprivileging.*
- F. Reprivileging recommended by L. Williams: Laura Garcia, NP
- G. Reprivileging recommended by L. Williams: Jannatul Ferdous, LCSW-C
- H. Reprivileging recommended by L. Williams: Yale Ben-Chaim, LMSW

ACTION ITEM: Committee members reviewed the three candidates. Follow-Up Topics: none. **By unanimous vote, the three candidates were approved for requested privileges by the committee members in attendance.**

Next Meeting: September 10, 2024 at 5:30pm