



Boston EMA Quality Improvement (QI) Culture Assessment Guidance Sheet

Purpose

The purpose of this assessment is to evaluate your Ryan White Part A program's current capacity to engage in quality improvement activities at your organization, and to identify strengths and opportunities to improve. The results of this assessment are not meant to be punitive, but to create guidelines for how we may work with you and your organization to identify next steps to improve your CQM program.

Completing the Assessment

- The assessment is split into four sections relating to various elements of quality improvement culture, each with 4-5 questions:
 - Infrastructure
 - Performance Measures
 - Improvement Capacity
 - Improvement Success
- Please complete ONE assessment for your agency with other members of your Ryan White program. The entire survey should take less than 20 minutes to complete.
- Each question has three answer options:
 - Yes – if you select “yes” on any measure, please be prepared to submit relevant documents that demonstrate this measure in the last 12 months.
 - We ask for documentation to build a library of best practices to share with other subrecipients, and to provide tangible feedback on your agencies demonstrated QI activities,
 - No – if you select “no” on any measure, please use the box below to share at least one potential next step for improvement that can be completed in the next 12 months.
 - N/A - select N/A if you are unsure of the answer or if the measure is not applicable to your program.

Results

- Results from this assessment will be shared in aggregate, and each agency will receive a report with agency-specific results
- These results will be used to identify areas where agencies are performing well and collect examples of plans, projects, and activities that can serve as best practices
- Results will also identify areas for improvement, and provide each agency with detailed, applicable feedback on how to improve the culture of QI

Glossary

Clinical Quality Management (CQM) is the coordination of activities aimed at improving patient care, health outcomes, and patient satisfaction.

Boston EMA Clinical Quality Management (CQM) Plan has been drafted by the CQM Program Coordinators and reviewed by the RWSD Director, the Clinical Quality Management Committee, and other members of the RWSD team. Its goals and objectives shall be assessed regularly for progress and updated annually. This plan can be found online at:

<https://www.bphc.org/whatwedo/infectious-diseases/Ryan-White-Services-Division/Documents/Boston%20EMA%20Quality%20Management%20Plan%20FY2018-FY2020.pdf>

Plan, Do, Study, Act (PDSA) Cycle is a model of improvement used to test and implement changes in a real work setting.

- Plan: Identify problems
- Do: Use strategies/tests that are designed to address the problem
- Study: Collect and analyze data to see if strategies have resulted in improvements
- Act: If the strategies are effective, make them an ongoing activity; if not, return to the plan stage

Quality Assurance (QA) refers to a broad spectrum of evaluation activities aimed at ensuring compliance with minimum quality standards. The primary aim of quality assurance is to demonstrate that a service or product fulfills or meets a set of requirements or criteria. QA is identified as focusing on “outcomes,” and CQI is identified as focusing on “processes” as well as “outcomes.”

Clinical Quality Improvement (QI) refers to activities aimed at improving performance related to clinical outcomes. It is an approach to the continuous study and improvement of the process of providing services to meet the needs of the individual and others.