

**Virginia Ryan White Cross-Parts Collaborative
Quality Management Advisory Committee (QMAC) Meeting
Wednesday, February 4, 2026**

- Time:** 9:00am to 12:30pm
Location: Virtual Meeting via Zoom
Invitees: QMAC Members
Goals: Share best practices related to the Virginia Ryan White Quality Improvement activities and discuss strategies to improve the QMAC infrastructure.

Welcome & Introductions – *Juan Pierce* (QMAC Co-chair)

- Agenda item skipped, as the QMAC co-chair was not present at the time

VDH Updates

Camellia Espinal (Quality Management Specialist, VDH)

- Leadership Transitions
 - State Health Commissioner
 - B. Cameron Webb, MD, JD replaced Karen Shelton, MD, effective January 17, 2026
 - Division of Disease Prevention (DDP) Director
 - Rachel Stallings replaced Elaine Martin, effective December 10, 2025
 - Kimberly Scott, HIV Care Services (HCS) Director, RWHAP B Principal Investigator/Principal Director retired January 31, 2026
 - Allison Green, RWHAP B Senior Advisor is the Acting HCS Director
 - Jonathan Albright, HCS Grants Manager is the Acting RWHAP B PI/PD
- Data Updates and Reminders
 - 2024 RWHAP B HIV Care Continuum data has been posted online:
 - <https://www.vdh.virginia.gov/disease-prevention/disease-prevention/hiv-care-services/>
 - Provide User Management Reminder
 - For staff transitions, please review you Provide Enterprise user list
 - An update on change to user management is slotted for the new grant year
- RSR Timeline: Important Dates
 - Year Round – GCMS is open
 - November 10, 2025 – Check your XML and TRAX updated
 - December 1, 2025 – RSR Recipient Report Start Date
 - February 2, 2026 – RSR Recipient Report Due and Provider Report Start Date
 - March 2, 2026 – RSR Provider Report Target Date
 - March 23, 2026 – Return for Changes Deadline
 - March 30, 2026 - Final RSR Deadline
- Important Dates
 - Joint Quarterly Contactors Meeting (Virtual) – March 4
 - QIP Quarter 4 Data Package – March 15
 - QIP Quarter 4 Report Due – April 15
 - Case Management Summit – April 21-22, 2026
 - CQM Plan Due – May 31

- GY26 QIP Topic Selection Poll and Survey
 - Participants suggested the following topics:
 - RWHAP A in DC requires case managers to conduct a mental health assessment, which also captures substance use disorder needs, for all clients. Case managers use a formal mental health screening tool for this task.
 - Evaluate continuity in care based on the level of care clients need (acute, critical, minimal, initial, ongoing). Look at this separately from VLS, although they could be related.
 - What does follow-up look like for clients who have fallen out of care? VDH HIV Surveillance generates and distributes a list of clients lost to care (Data to Care list) to agencies quarterly. Many agencies no longer have sufficient staff to work the list due to funding cuts.
 - Submit other suggestions via the link that Lydia Legan put in the chat.

Education Moment - 2025 Virginia Ryan White Part B Clinical Quality Management Organizational Assessment Results

Ayleen Stafford (Quality Improvement co-chair), *Mark Baker* (Quality Improvement co-chair)

- Purpose of the Organizational Assessment
 - The results will be used to guide the planning process, develop a work plan and assist in focusing on priorities, setting direction and assuring that resources are allocated for the CQM
- Assessment Overview
 - Assessments were distributed through a link via email
 - Response period of 6 weeks
 - Responses were collected via Microsoft Forms, containing 25 evaluation-based questions, on a scale ranging from zero to five
 - Responses received from 21 individuals across 15 organizations
- Respondent Roles
 - Executive Director (4)
 - Director (2)
 - Assistant Director (1)
 - Care Services/Program Manager (6)
 - Case Manager (3)
 - Grants Manager/Monitor (2)
 - Quality Assurance Manager (1)
 - Quality Improvement Data Analyst (1)
 - Ryan White Provider (1)
- Overall Survey Average: 3.5 out of 5
- Recommendations
 - Organizations should ensure that personnel responsible for Quality Improvement (QI) activities are the individuals completing the assessment.
 - Any item scored below a 3 must prompt follow-up with the respondent to determine the basis for the rating and to identify any additional support, resources, or capacity-building needs associated with that question.

- All newly funded Ryan White Part B organizations are required to participate in the Quality Management (QM) onboarding and training process as part of program initiation.
- To strengthen data accuracy in CareWare uploads, CDAT Team will provide targeted technical assistance, including a review of each agency's RSR. They will also work directly with agencies to identify data discrepancies and verify that Provide contains complete and accurate information.
- Conclusion
 - The OA results indicate a solid foundation for statewide quality management, with clear opportunities to enhance training, data quality, and collaboration. Implementing the recommended actions will support a more consistent, data-driven, collaborative statewide CQM program.
- A participant proposed that agencies use the Organizational Assessment tool to evaluate their CQM plan on a regular basis.
- Another person mentioned using the QMAC newsletter to push out information about CQM.

Cross-Parts Update: Parts A, C, D and F

Lynea Hogan (Quality Management Specialist, VDH)

Part A

- Norfolk TGA
 - The Recipient's Office welcomed the new Program Manager, Dr. Cleophas D'Auogne on 12/5/25
 - The Recipient & Planning Council has moved under the Norfolk Health Department.
 - 830 Southampton Ave., Norfolk, VA Suite 2074
 - Part A Service Utilization Data for FY25 Quarter 3
 - (March 1, 2025-November 30, 2025)
 - Total clients served: 2271
 - Total Units of Service: 51,490
 - Q3 TGA Viral Load Suppression rate is 86%
- DC EMA
 - Full Notice of Award (NOA) received
 - Total award: **\$33,257,000** (includes carryover)
 - GY26 Funding Outlook
 - Anticipated partial NOA due to federal Continuing Resolution
 - Full award expected later with updated HRSA formula
 - Slight overall decrease anticipated for Part A
 - GY26 Continuation Awards
 - Continuation letters currently in preparation
 - Expected distribution by January 31

Part C

- University of Virginia (+ Part D)
 - Continued patient care to support HIV viral suppression
 - Ongoing efforts to offer patient support groups in a virtual format

- Adjustments due to reduced funding for in-person transportation support
- Client Quality Meetings
- Women’s Support Group
- Men’s Support Group
- Client Advisory Board (CAB) meets monthly
- Nutrition cooking demonstrations (to be scheduled)
- **NEW:** VDH VACAC Northwest Support Group (to be scheduled)
- **NEW:** Psychosocial Support Gardening Project
 - Focus on food insecurity and healthy eating
- VCU
 - **Brief Overview of Activities**
 - World AIDS Day tabling event at Main Hospital
 - Ongoing client engagement and outreach activities
 - **Reopened programs:**
 - Legal services
 - Dental services
 - **Performance Measures (October 2025)**
 - Linkage: 60%
 - Retention: 65%
 - Viral Load Suppression: 91%
 - **Upcoming Events & Initiatives**
 - Women and Girls Day – **March 10**
 - Thrive Support Group
 - Tuesdays, 6:00–8:00 PM
 - Wisdom Wednesdays
 - 4th Wednesday of each month, 11:00 AM–12:30 PM
 - Harbor Support Group (HIV & addiction recovery)
 - Mondays, 6:00–7:30 PM
 - Rapid Testing expanded to Test and Treat
 - Same-day testing and treatment at West Hospital

Part F

- INOVA (+Parts C&D)
 - Program Updates
 - Dumfries clinic relocated to a new site in Dumfries
 - Co-located with Inova Cares for Families and Inova Cares for Women
 - Expanded access to primary and specialty care for RW clients and families
 - Educational Offerings:
 - HIV and Mental Health (Virtual) – **February 24**
 - HIV 101 – **February 25**
 - Prevention Counseling Series:
 - Facts – **March 17**
 - Fundamentals – **March 18**
 - Waived Rapid – **March 19**
- VCU – AIDS Education Program
 - Staffing Updates

- New hire: Part-time MAI Health Educator, Darnell Barrington, MPH, CHES
- Expanded capacity for MAI-focused programming
- Future hiring planned pending 2027 funding
 - One additional full-time Health Educator
- HIV and Aging Activities:
 - Three HIV and Aging scholars actively progressing:
 - Fox Beavers (Central)
 - Irene Bethel (Southwest)
 - Nhu-Y Le (Northern)
 - Case Management Community of Practice (CoP)
 - Three-part series on HIV and Aging, launching March 17
- Partnerships and Training Expansion:
 - Partnership with PrimeCare Medical (Norfolk)
 - Delivered Prevention Series training
 - Supports expansion of HIV services statewide
 - Collaboration with:
 - VDH
 - Virginia Rural Health Association
 - Development of online PrEP & PEP curriculum
 - Designed for non-ID providers
 - Accreditation planned for:
 - Medicine
 - Nursing
 - Pharmacy
 - Tentative launch date: April 23
- **Training Reach and Engagement:** (Since November 13, 2025)
 - 230 unduplicated learners
 - 12 programs delivered
 - 5 virtual trainings
 - 5 in-person trainings
 - 2 technical assistance sessions

Performance Measures by Funded Services Category and GY24 QIP Summary

Tinika McIntosh-Amouzouvi (Lead HIV Care Services Analyst)

- CQM refresher
- Performance measure #1: Viral Load Suppression by Service Category
- Performance measure #2: Clients Retained in Care by Service Category
- Performance measure #3: Clients Retained in Ryan White B Care by Service Category
- Quality Improvement and Ryan White HIV Care Continuum for Calendar Year 2024
 - Unified Eligibility PDSA Update
 - VA RWHAP Part B Eligibility Checklist
 - Attestation Templates
 - Please continue to fill out the feedback survey after your TA sessions!
 - Error Correction
 - Auditor assistance with data entry corrections

- Please continue to work to correct your errors within 4 weeks of receiving your error report
- Changes to New User Management
 - New Users
 - Supervisors will be prompted to add Provide New User Orientation Certificate to the REDCap user request for
 - Supervisors requesting access for ‘new’ Ryan White users entering Unified eligibility assessments (UEAs) will be prompted to add UEA Training Certificate to the REDCap user Request form
 - Current Users entering Unified Eligibility Assessments
 - Access to *complete* UEAs may be restricted after consistent error rates above the contractual agreement of 15%
 - Users with access restricted will be asked to complete remediation training for UEAs before allowed to *complete* UEAs
- Reminder: RSR opened this week

Break (15 minutes)

Breakout Session – QMAC Subcommittees (45 minutes)

- GY25 Workplan progress, GY26 brainstorming, and Attendance

Report Out – *QMAC Subcommittee representatives*

- Subcommittee updates provided on GY25 workplan progress, special projects, and collaborations

Wrap-up – *Allison Green* (Acting HIV Care Services Director)

- Data must be practical, responsive, and aspirational.
- Accurate and reliable data are critical when developing and proposing programs, budgets, and initiatives or when responding to questions, as new leaders are focused on data-driven choices and decisions.

Adjournment – *Juan Pierce* (QMAC co-chair)