QUALITY MANAGEMENT ADVISORY COMMITTEE
2018

SAFERE DIAWARA, MPH

QUALITY MANAGEMENT COORDINATOR

HIV CARE SERVICES

VIRGINIA DEPARTMENT OF HEALTH

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Purpose

The purpose of this document is to provide insight and guidance on the roles and responsibilities of the Virginia Quality Management Advisory Committee (QMAC) and related structure.

QMAC BACKGROUND & MISSION

The QMAC was created by the Virginia Department of Health (VDH) in 2009 as part of Virginia's Ryan White Part B infrastructure. In 2011, it was extended to include the Virginia Ryan White HIV/AIDS Program (RWHAP) Cross-Parts Collaborative, which had operated independently of the QMAC from 2008-2011. The QMAC provides a mechanism for stakeholder input on objectives, evaluation, and continuing improvement of HIV care and support services in Virginia and facilitates cross-Part dialogue.

The mission of the QMAC is to promote best practices used by RWHAP funded agencies to achieve optimal HIV health outcomes for Persons Living with HIV (PLWH) in Virginia using established quality improvement methods. QMAC quality improvement activities enhance the ability of PLWH to access services equitably including the elimination of disparities in outcomes among key populations, especially historically underserved communities. The QMAC advises VDH on the statewide RWHAP Part B QM plan, as well as programmatic, improvement, clinical, and educational issues as needed. The QMAC reviews Quality Improvement (QI) data and assesses implications of trends and program changes, including the impact on other statewide HIV services. The work of the QMAC is carried out through an Executive Committee, five subcommittees; Data, Capacity Building, Communication and Quality Improvement and the Virginia Quality of Care Consumer Advisory Committee (VACAC).

MEMBERSHIP

All RWHAP Part B sub-recipients funded by VDH are required to have representation in the QMAC, but membership is intended to include the full spectrum of the HIV care system. The QMAC membership includes:

- Virginia Department of Health (VDH) staff
- RWHAP recipients and sub-recipients of all Parts funding (A, B, C, D, F)
- Consumers from the five Virginia health regions
- QM Coordinators from local sites
- Data Managers
- Clinical Providers
- HIV Program Administrators
- Other Key Stakeholders

QMAC membership is reviewed annually and changes are made accordingly as needed. Membership is typically for one-year term, with the option to renew. Nominations to the QMAC are submitted through an open application process. Applications are available through the VDH website. Completed applications are submitted to the Executive Subcommittee for review.

Members are selected based on their experience and in consideration of demographic reflectiveness of the membership with the statewide HIV epidemic. In addition, decisions are made based on existing regional and agency representation to prevent overrepresentation by any one agency or region. Members are expected to represent their agency as well as serve on one of the subcommittees.

The member will forfeit their seat if he/she fails to attend either:

(i) three (3) consecutive regularly scheduled meetings during the calendar year or

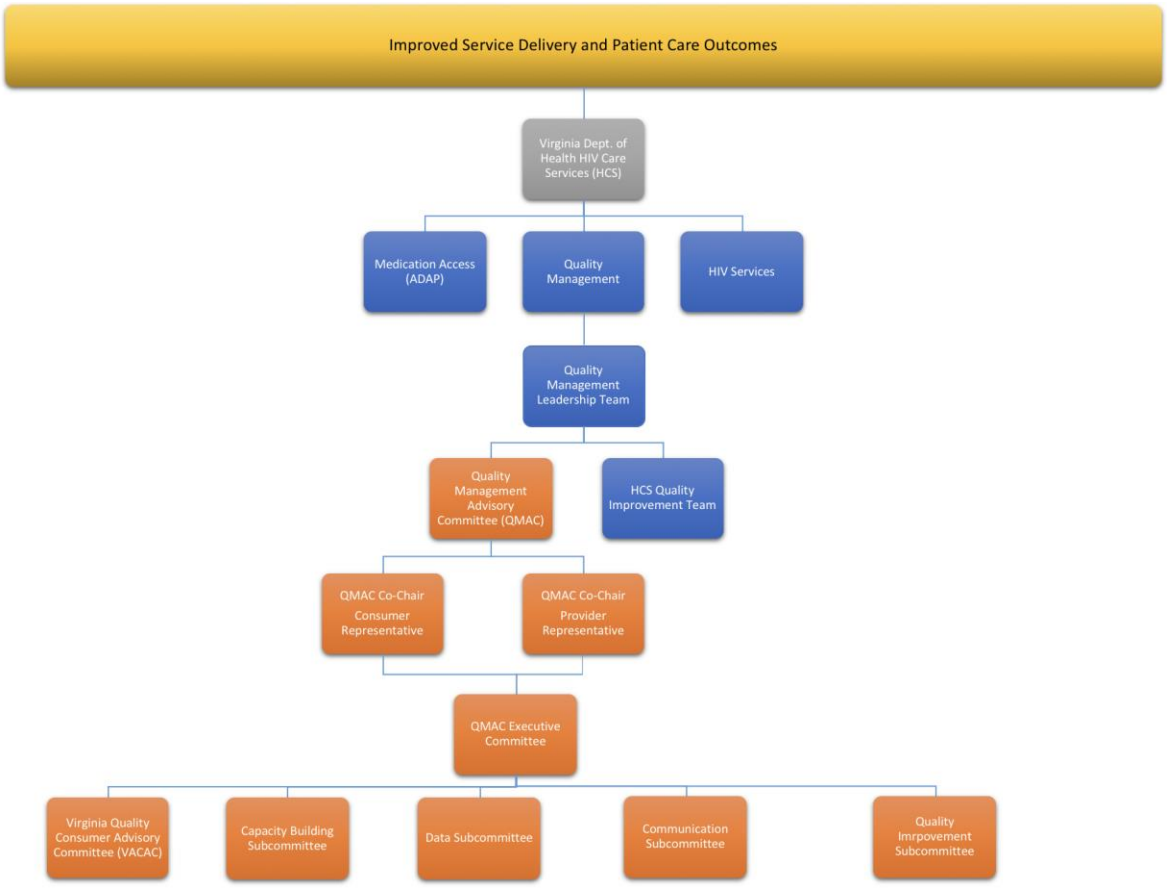
(ii) fifty (50%) percent of the meetings in any twelve- 12- month period, excluding absences because of illness or necessity of business.

A warning letter will be sent to those members that have two consecutive unexcused absences, notifying them of their potential forfeiture of seat.

Members may also decide to terminate their QMAC membership before their 12-month membership period is up. The only stipulation behind self-termination is that members must ensure there is at least one other formal QMAC member from their organization still participating in the QMAC.

STRUCTURE

The work of the QMAC is led by the Executive Committee and implemented through five subcommittees. Each committee is expected to create and utilize a work plan that drives the relevant activities.



EXECUTIVE COMMITTEE

The Executive Committee includes VDH staff, the QMAC Chair, the chairs of each of the other five subcommittees, and a RWHAP funded program representative to ensure geographic representation from the five Virginia health regions. The Executive Committee provides oversight and support to the QMAC and works with QMAC members to set goals, determine priorities and provide technical support necessary to implement identified quality initiatives. Executive Committee responsibilities include:

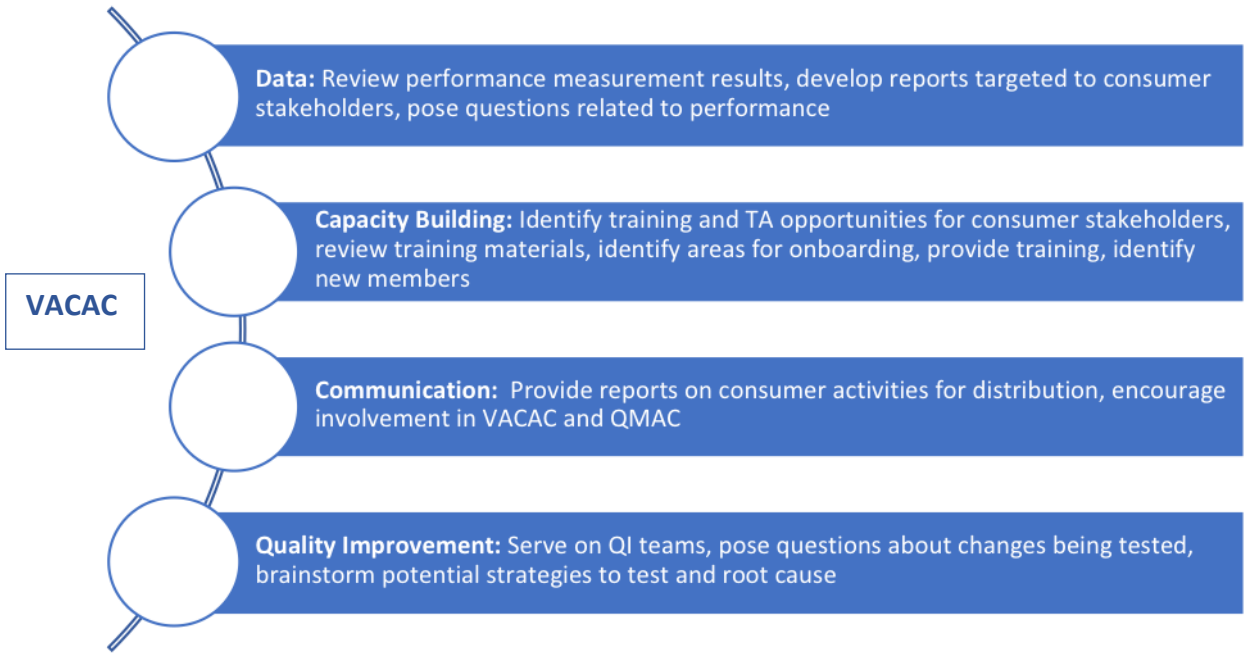
- Define the QMAC structure and process for statewide QM activities;
- Oversee the implementation of subcommittee and overall QMAC work plans;
- In conjunction with VDH, coordinate QMAC and subcommittee work;
- Curate a menu of annual QI projects for QMAC member consideration;
- Identify key considerations related to performance measurement, service standards, or other core quality management activities for discussion at the QMAC meetings;
- Make decisions on new member candidates;
- Make decisions related to member terminations;
- Provide encouragement and enthusiasm for the QMAC membership;
- Oversee QMAC data analysis and reporting activities;
- Take the lead in planning and implementing quarterly QMAC meetings; and
- Take the lead in planning and implementing the annual Quality Management Summit.

VIRGINIA QUALITY OF CARE CONSUMER ADVISORY COMMITTEE (VACAC)

The VACAC is to establish a sustainable partnership with providers to incorporate the experiential perspectives of people living with HIV/AIDS into the quality improvement process. The committee works with the Virginia Department of Health (VDH) to ensure that people living with HIV/AIDS have input into the creation, development, and implementation of all its services and policies.

The VACAC responsibilities are to:

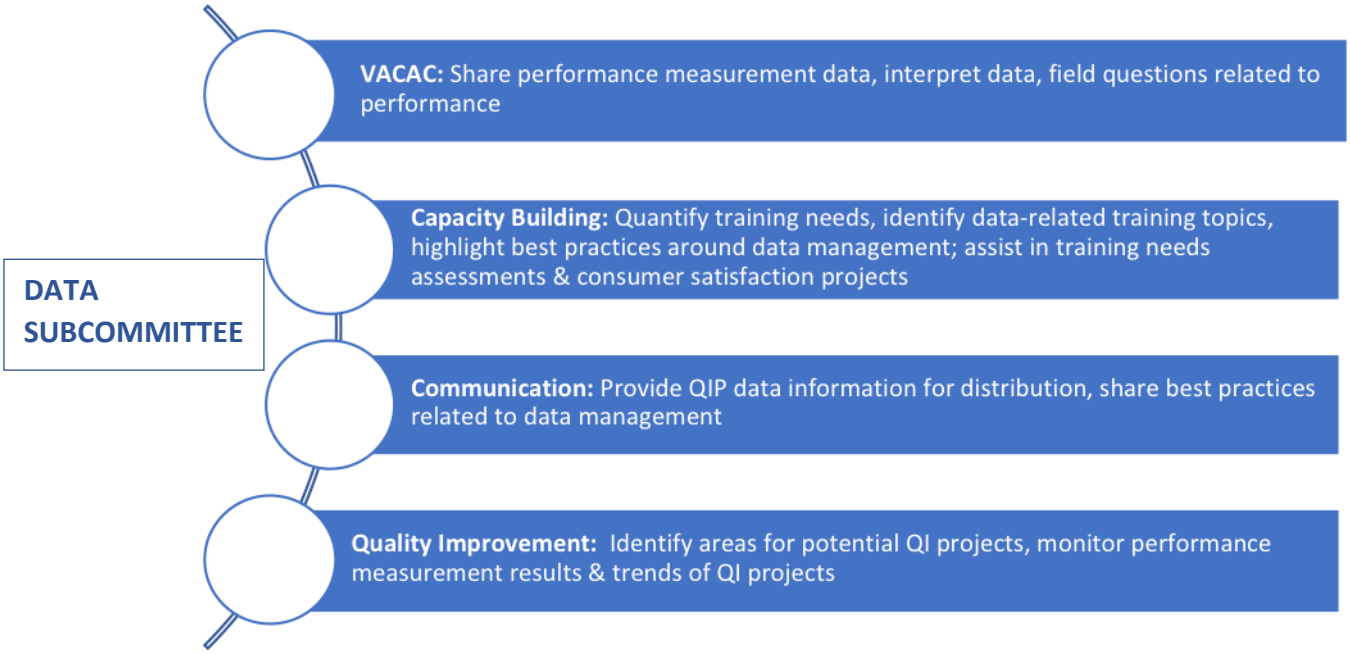
- Act as liaison between consumers, VDH and service providers;
- Engage, educate, and bring together consumers through a variety of activities that support health promotion and quality of life;
- Provide orientations and trainings for new and current VACAC members on QI and the HIV epidemic in Virginia;
- Assess VACAC membership yearly to ensure appropriate special subpopulation representatives are included;
- Provide input on the VDH planning and Quality of Care Program; including, but not limited to, performance measurement, needs assessment, QI projects, quality infrastructure requirements, and targeted consumer initiatives;
- Inform and educate consumers about current and future quality initiatives of the VDH's HIV Quality of Care Program;
- Participate actively in local groups (i.e., facility-level consumer advisory boards, or quality management committee, etc.); and
- Report to Executive Committee and coordinate with QMAC Subcommittees.



DATA SUBCOMMITTEE

The Data Subcommittee provides overall guidance on applying data to Quality Improvement and Quality Management initiatives. This subcommittee is composed of members from the QMAC who have expressed an interest in assisting with data related activities. The responsibilities are to:

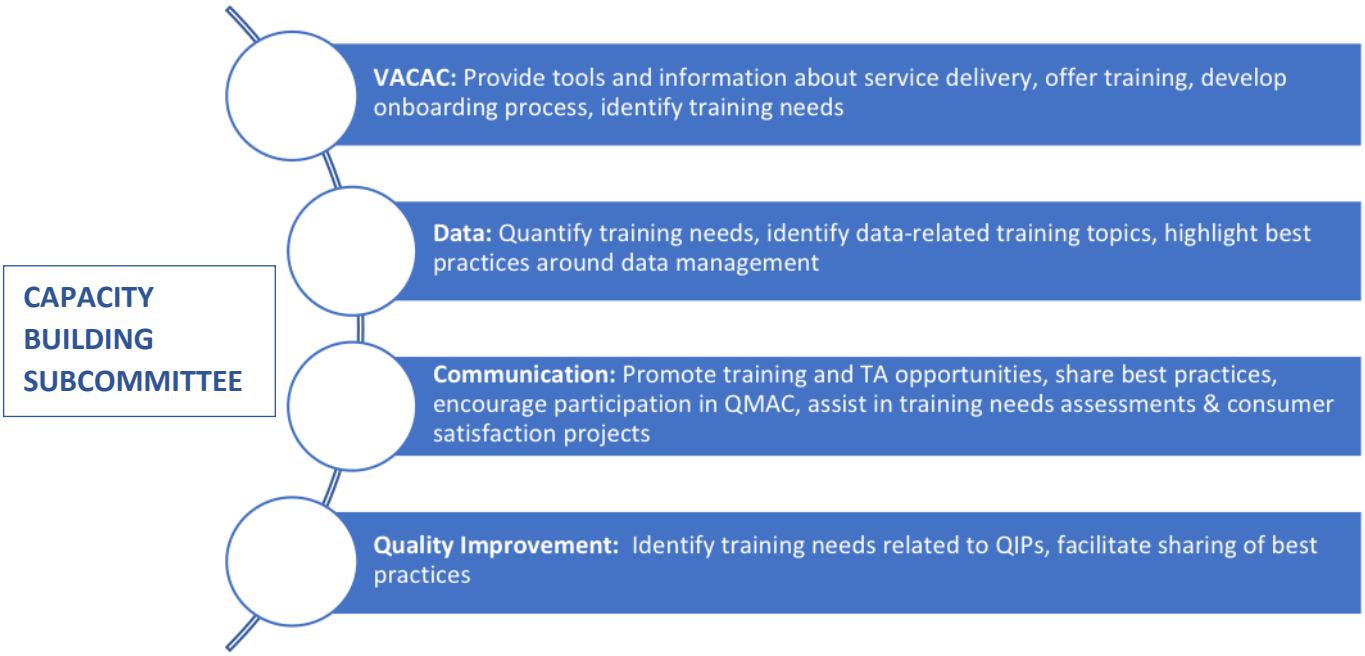
- Help determine how to use data in conjunction with QI activities to develop strategies for improving care;
- Monitor performance measurement results and trends for QI projects
- Provide input as requested to the selection and implementation of the selected QI projects;
- Provide QIP Data information for distribution to stakeholders;
- Identify areas for potential QI projects;
- Review statewide QIP and HIV continuum of care related data over time for trends monitoring;
- Identify and explore issues related to specific identified data management systems (CAREWare and E2Virginia);
- Report to and coordinate with the Executive Committee about data management activities/projects as they are reviewed and considered;
- Use reporting tools to summarize data so key stakeholders can make business decisions;
- Identify best practices around data quality management; and
- Report to Executive Committee and coordinate with QMAC Subcommittees.



CAPACITY BUILDING SUBCOMMITTEE

The Capacity Building Subcommittee supports cross-Parts quality activities identifying training and technical assistance needs of all stakeholders. The subcommittee is composed of members who have expressed an interest in assisting with training and capacity building activities. The responsibilities are to:

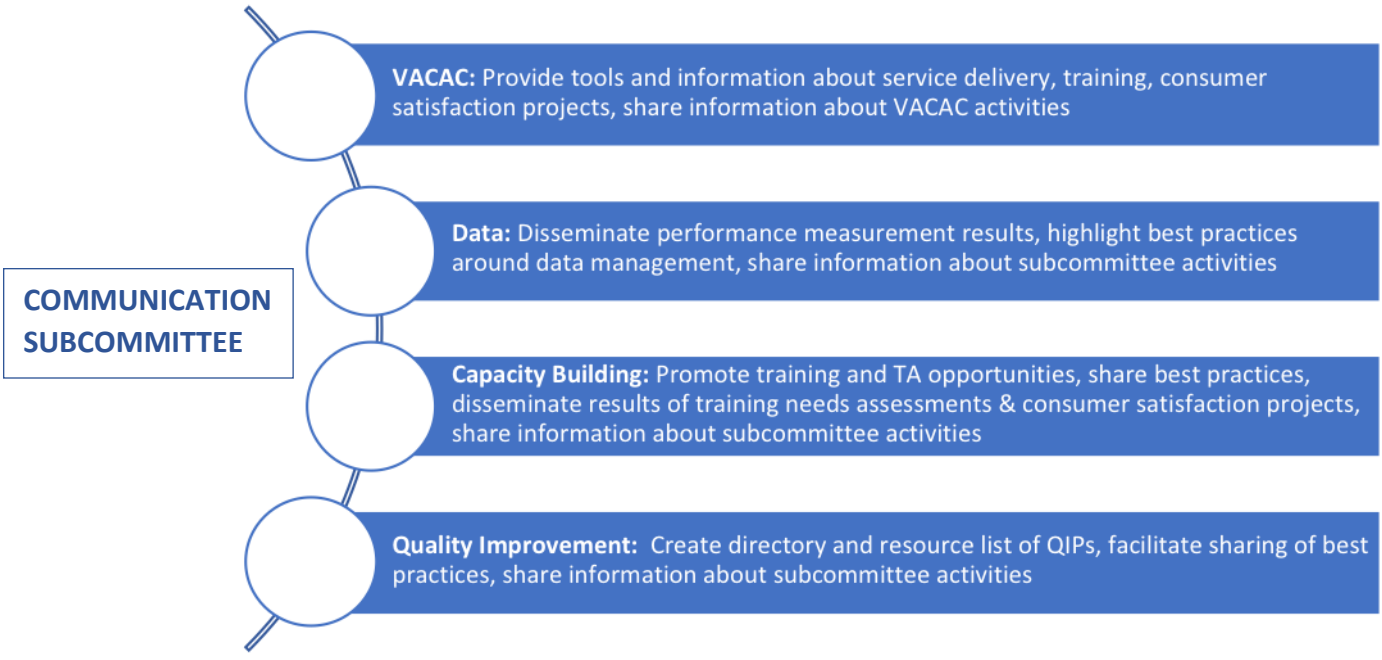
- Work with VDH to strengthen subrecipients quality infrastructure through training needs assessment, skills-building activities, targeted on-site assistance, and resource identification;
- Develop process for requesting TA from the QMAC
- Assess training needs through subrecipient requests, training evaluations needs assessments/consumer satisfaction projects and/or Subcommittee interactions;
- Contribute to the development and implementation of QM trainings based on identified needs;
- Provide information about TA and trainings for distribution to stakeholders;
- Empower consumers through education by providing the tools and information about healthcare service delivery;
- Identify models for QM Program sustainability;
- Develop and implement an onboarding process for all new members, including a mentor program;
- Encourage and solicit participation in QMAC; and
- Report to Executive Committee and coordinate with QMAC Subcommittees.



COMMUNICATION SUBCOMMITTEE

The Communication Subcommittee sends variety of official communications and makes recommendations to the QMAC and stakeholders, regarding quality improvement activities. This subcommittee is composed of members who have experience or interest in utilizing various communication modalities targeted to a range of stakeholders. The responsibilities are to:

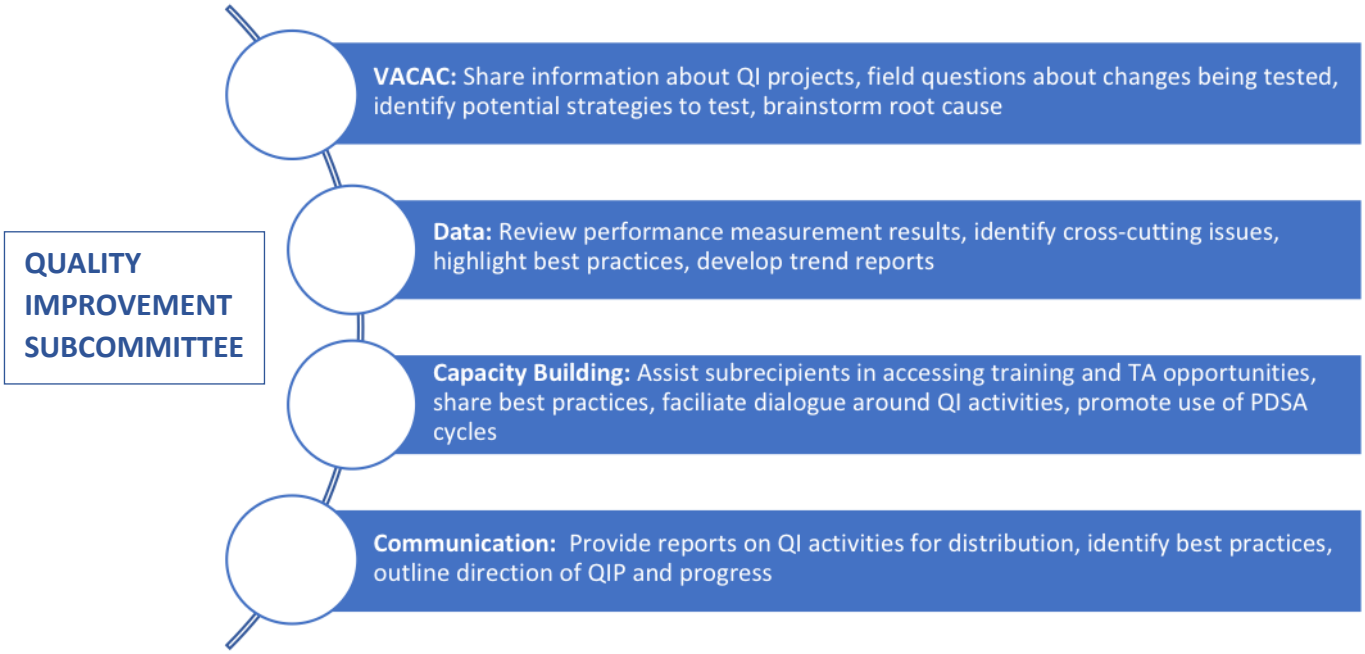
- Serve as official communication channel for the QMAC and ensure effective communication with other QMAC subcommittees;
- Improve communications between the QMAC and stakeholders;
- Provide information and opportunities to expand QM knowledge and contacts through several modes of communication to QMAC and stakeholders;
- Create QMAC quarterly newsletters including meeting summaries to disseminate;
- Communicate findings and solicit feedback from both internal and external key stakeholders on an ongoing basis;
- Disseminate information received from all subcommittees about QI activities and findings to all stakeholders;
- Give updates regarding QM activities and outcomes to all program staff during QMAC meetings on a quarterly basis;
- Ensure meeting minutes are accurate and distributed within two-week of each meeting.
- Create a directory and resource list of agencies QIPs that include best practices;
- Report to Executive Committee and coordinate with QMAC Subcommittees.



QUALITY IMPROVEMENT SUBCOMMITTEE

The Quality Improvement subcommittee assists the QMAC with the development of reports, recommendations and best practices related to Quality Improvement initiatives. This subcommittee is composed of members from the QMAC who have expressed an interest in assisting with QI activities. The responsibilities are to:

- Facilitate a dialogue around quality improvement activities;
- Provide a system of education and technical assistance that increases the use of quality improvement principles and processes from stakeholders;
- Provide reports on quality improvement activities for distribution to stakeholders;
- Guide the direction of the statewide QIP across subrecipients;
- Assess progress and status of QIP, review results, identify cross-cutting issues and best practices of QI projects;
- Assist subrecipients in assessing and improving their quality of care by providing various resources and securing needed TA;
- Promote the PDSA (plan, do, study, and act) cycle for small tests of change (pilot tests); and
- Report to Executive Committee and coordinate with QMAC Subcommittees.



QMAC ROLES

INDIVIDUAL MEMBER ROLES

More than 45 individual QMAC members are drawn from the Virginia RWHAP Part B sub-recipient agencies they represent. By participating in the QMAC, members are able to provide important feedback as stakeholders in the overall statewide program. In this capacity, QMAC members are expected to:

- Participate in developing statewide priorities and QI goals;
- Determine statewide quality initiatives and performance indicators and goals;
- Provide feedback to address problems and concerns that improve the statewide QM Program;
- Review system-wide service delivery issues and challenges;
- Develop strategies to improve HIV care and ultimately HIV health outcomes;
- Review and revise assessment and data collection tools as necessary;
- Plan and develop educational strategies for RWHAP providers in Virginia; and
- Review and recommend revisions to standards of care to reflect current Public Health Service Guidelines and other Federal and state regulations related to HIV care and services

Participation in the QMAC not only provides sub-recipients and key stakeholders with an opportunity to provide their input into the overall statewide program, but it is an opportunity to align their organizational HIV quality programs with the state program. As vehicles for alignment, QMAC members are expected to:

- Align home agency QI priorities with statewide priorities and QI goals;
- Review health outcome measure reports and other relevant data in comparison with benchmarks;
- Use continuous improvement methodologies to improve care;
- Collect home agency performance measurement and improvement activity data to share at with the QMAC; and
- Pass knowledge of statewide QM work to colleagues at home.

SUBCOMMITTEE CHAIR/CO-CHAIR ROLES

Any current subcommittee member can be nominated to become the subcommittee chair or co-chair and there are no term limits. Individuals in these roles should be skilled at facilitating discussion and delegating tasks. Subcommittee chairs and co-chairs are expected to:

- Oversee the development of subcommittee work plans and processes;
- Participate in the Executive Committee;

- Provide guidance and coaching to subcommittee members involved in implementing the subcommittee work plan;
- Provide training and resources to subcommittee members during meetings as appropriate; and
- Routinely interact with the other Subcommittee Chairs to align activities.

QMAC CHAIR ROLES

Any current QMAC member can be nominated to become the QMAC Chair and is elected annually. There is no term-limit. The QMAC Chair is expected to:

- Serve as the Chair of the Executive Committee;
- In conjunction with VDH, develop agendas and plan for QMAC meetings;
- Provide oversight and vision to the QMAC as a whole;
- Review workplans of the Subcommittees to ensure alignment with the overarching QMAC workplan.

PLWH ROLES

The VACAC provides a mechanism for PLWH to have meaningful input into the development of RWHAP Part B policies and programs in Virginia that address their needs. Through their lived experience, consumers are well positioned to assess the quality and effectiveness of RWHAP funded services in Virginia. PLWH are expected to:

- Provide input to the development and implementation of Virginia HIV/AIDS programs and policies;
- Provide experiential feedback on services provided by RWHAP funded organizations in Virginia;
- Ensure significant PLWH input into community programs providing HIV/AIDS- related services;
- Act as a liaison between consumers, RWHAP funded service providers in Virginia, and VDH;
- Educate and bring together consumers through a variety of activities that support and encourage consumer involvement;
- Recruit a diverse membership that is reflective of the local epidemic in terms of race/ethnicity, gender, sexual orientation, age and mode of transmission, and geographical distribution; and
- Serve on the Executive Committee or Subcommittees as requested.

MEETINGS

QMAC MEETINGS

In-person and virtual meetings will be utilized to implement the QMAC activities.

Face-to-Face Meetings - The QMAC meets face-to-face each quarter at various locations across Virginia. Meetings dates and locations are announced three to four months in advance to facilitate member planning. Meetings are a full-day and overnight accommodations are available for members traveling more than 50 miles to the meeting.

Virtual Meetings – When virtual QMAC meetings are necessary, members will be notified at least two months in advance. Meetings will be convened using a platform that allows for use of webcams.

Minutes - Minutes are taken at all QMAC meetings. The minutes record attendance and include all recommendations, requests, and action items. Any QMAC member wishing to propose corrections to the minutes shall propose corrections at the meeting at which the minutes are subject to approval.

EXECUTVE COMMITTEE

The Executive Committee will meet on monthly basis

QMAC SUBCOMMITTEE MEETINGS

QMAC Subcommittee meetings are called at the discretion of the Subcommittee Chair and contingent on the Subcommittee's overall progress in meetings its work plan objectives. The bulk of sub-committee work happens in between QMAC meetings, which is why more frequent brief virtual catch-ups are required to ensure that the work stays on track. Subcommittees are always given face-to-face time during the quarterly QMAC meetings.

Face-to-Face Meetings – Subcommittees routinely have an hour or two during the afternoon of each QMAC meeting to catch up with each other around the work plan progress, complete team-building activities, and to provide training and other assistance to members.

Virtual Meetings – Chairs are responsible for calling meetings with at least one-month notice to facilitate their members' ability to plan and attend the meeting. There is no required timeline or duration for these check-ins, but it is encouraged to happen at least once between each QMAC meeting. Meetings will be convened using a platform that allows for use of webcams. Virtual check-ins can be used for more than catching up and represent another opportunity for team building and brief, targeting training.

Minutes – Subcommittee chairs are encouraged to delegate a member to take notes on attendance, main discussion points, and all action items. The minutes are shared with the Executive Committee.

MEETING GROUND RULES

The ground rules describe the behavior expected of all QMAC participants at all meetings and activities associated with the work of the QMAC. They are designed to ensure that the QMAC can be productive, open to community input, and respectful of its members and visitors. They help to

create a positive environment, and to protect all members and public participants from inappropriate and disruptive behavior.

QMAC members are expected to follow these rules of conduct in QMAC and subcommittee meetings and other QMAC events:

- Everyone participates, no one dominates
- One person speaks at a time
- Stay on subject and follow the agenda – it is everyone's responsibility
- Success depends on participation 100% – share ideas, ask questions, draw others out
- Deal with the real issues; avoid seeing only what you want to see
- Constructive, honest debate is needed to move ahead together productively
- Be positive, non-judgmental, and open to new ideas
- Respect each other's thinking and value their contributions
- Manage group work
- Attack problems, not people
- No story telling – a system is not about any one person
- Have fun

There are consequences if a QMAC member or other participants fail to comply with the Ground Rules above:

- When a QMAC member or other participant violates these Ground Rules in a meeting, the QMAC or Subcommittee Chair is expected to inform him/her that the behavior is unacceptable. Others in attendance are expected to support the QMAC or subcommittee chair in ensuring that everyone follows the Ground Rules. If inappropriate behavior continues and the Chair feels it will disrupt the process, s/he may ask the individual to leave the meeting. Prior to removing the individual, the Chair of the meeting shall publicly state the reason for removal.
- If a member of the QMAC or other participants repeatedly violates the Ground Rules, the QMAC Executive Committee may remove this individual as a member.

TRAVEL REIMBURSEMENT

Travel reimbursement works differently for subrecipient representatives and PLWH. Both are explained below.

Virginia RWHAP Part B Sub-recipient Reimbursement

Unless other arrangements have been made, VDH will not directly reimburse any individual traveling on behalf of a Virginia RWHAP Part B sub-recipient. Instead, individuals must go through their home agency's reimbursement process and receive their payment in full from that process. The sub-recipient agency is then authorized to bill the reimbursed amount against its Virginia RWHAP Part B CQM funds to be reimbursed in turn.

PLWH Reimbursement

Travel reimbursement is available to support PLWH participation to QMAC activities and help ensure that all are able to attend regardless of financial circumstances. **No pre-paid assistance is available.** Individuals in travel status for the QMAC must adhere to the same travel regulations as VDH employees such as completing a W-9 form and keeping all receipts for requested reimbursement of expenses with limited exceptions. Details for PLWH travel reimbursement are explained below.

- Participants must fully complete the Division of Disease Prevention (DDP) travel worksheet including whether they were a driver, had passengers, or were a passenger.
- The VDH current mileage reimbursement will be applied. Participants must indicate whether they left and returned to either a home, office, or other location. Mileage is verified by DDP using Google Maps.
- Receipts are not needed for tolls under $20; however, the name of the toll road and amount of the toll must be indicated. Tolls $20 and above require submission of an original receipt.
- Original receipts are needed for parking. The name and location of the parking facility on the travel worksheet must be provided.
- The current maximum daily rate for per diem reimbursement (meals, tips, etc.) will be applied minus any meals that were provided (i.e., lunch). Receipts are not required for meals. For information on current per diem rates visit https://www.gsa.gov/travel/plan-book/per-diem-rates
- Please remind any guests of QMAC members that VDH will not pay for their travel or meals (including the group lunch).
- Original receipts, including boarding passes if applicable, are required with the submission of the travel worksheet for bus, train, or plane fare, even if VDH has pre-paid these transportation costs. Original receipts are also needed for shuttles, taxis, etc.
- For special meetings such as the QM Summit, VDH will help alleviate financial barriers for consumers and direct bill lodging (room and tax only) for consumers residing 50 miles or more from the meeting site. Participants are required to pay for any incidentals at the time of check-out including meals that will later be reimbursed by VDH, room service, movies, phone calls, internet connections, etc. Participants should be prepared to have either a credit card or cash deposit to cover incidental charges regardless of whether they expect to have any additional costs on your bill.
- If attendance must be cancelled after 3:00 p.m. on the day prior to your check-in date, the QMAC member is responsible for contacting the hotel directly to cancel the reservation. Individuals who fail to notify VDH or the hotel of their absence will be responsible for paying for the "no-show" room.
- If individuals owe the Commonwealth of Virginia any money (i.e., back taxes, child support), they may not receive a travel reimbursement check. The amount of their check will be directed automatically to the Department of Accounts (DOA) to offset their debts. In such cases, a letter

from the DOA debt set-off program, stating the amount that was applied to the debt, will be mailed to the individual.

- Please fully complete the travel worksheet and carefully review the travel voucher prior to signing and dating the voucher. By signing the voucher, the member certifies that all information is accurate. Please submit both the worksheet and voucher prior to leaving the meeting. Any receipts that cannot be provided prior to departure should be mailed.
- Members are encouraged to participate in the Virginia Department of Accounts Electronic Data Interchange Program (EDI) for direct deposit of their travel checks. See www.doa.Virginia.gov for instructions on signing up for EDI.
- Members will be asked to complete a W-9 Request for Taxpayer Identification form.

QMAC MEMBER TRAINING

QMAC members are exposed to a great deal of information of many types and are needed to coordinate quick and efficient responses that promote improvement. It is essential that QMAC members are effectively trained and supported to complete their tasks. Management of the QMAC training plan is the responsibility of the Capacity Building Subcommittee and has three components, all of which are explained here: the buddy and mentorship program, onboarding training, and ongoing training for QMAC members.

BUDDY AND MENTORSHIP PROGRAM

A new buddy and mentorship program is being developed arising from QMAC member feedback collected through a key stakeholder interview process. New QMAC members will be paired with an existing QMAC member drawn from a pool of volunteers.

Buddies engage in special activities to form a relationship starting with new member Orientation. Part of the Orientation involves icebreakers around story telling that focuses on QMAC work, personal drivers of members in the work, and hands on exercises that relate training to current work in the QMAC. Beyond Orientation, buddies are encouraged to meet the night before each QMAC meeting for the first year to review the agenda and explore issues regarding the QMAC process or work.

The Capacity Building Subcommittee maintains the list of active volunteers in addition to a list of the pairings. Members paired in buddies are asked to annually review the relationship and provide input into how to improve the process. Pairs may dissolve at the request of either member for any reason and members who wish to be paired with someone else will be matched again by Capacity Building Subcommittee.

ONBOARDING TRAINING

A new member onboarding training is being implemented in 2018. QMAC orientation is done the day before the first QMAC meeting of each fiscal year. The orientation program lasts 4 hours, allowing members to travel to the meeting place in the morning and to check into the hotel. As already mentioned, the orientation is a special opportunity for buddies to begin forming their relationship that will be

important throughout the new member's first year.

Topics covered in the orientation include an overview of the QMAC, its structure and purpose, member roles and responsibilities, and administrative items. Particular focus is on QMAC's role in HIV service delivery in Virginia and the importance of the work that is done. In addition, the orientation includes an introduction to QM and QM terminology, how our home agency data or personal health information relates to QM, an overview of current QI projects and the activities surrounding them, and review federal and state priorities related to HIV treatment and services in Virginia.

In addition to face-to-face orientation training, several virtual training modules are included and are a part of routine interaction between friends to discuss and apply learning using real clinic or QMAC examples.

QMAC TRAINING MANUAL

All new members are given a QMAC manual during their orientation. While the manual is updated from year-to-year, it does not change substantively over time. The current version of the manual is available for review and download at NEEDS A WEBSITE.

The manual contains an overview of QMAC roles and responsibilities, the QMAC structure and purpose, the QMAC planning year and is updated to include the current QMAC work plan and implementation timeline tied to annual goals.

The online version of the training manual includes numerous training resources that are related to both orientation and the ongoing training for QMAC members.

ONGOING TRAINING FOR QMAC MEMBERS

To maintain a consistent level of understanding, competency, and confidence in QMAC subject matter, the Capacity Building Subcommittee maintains an annual training plan that is informed by an annual training assessment. As feasible, training topics that are pertinent to all members will be incorporated into the QMAC meetings. Content from the training plan is also used to inform the QM Summit agenda.

QM SUMMIT

The QM Summit is an annual two-day meeting that takes the place of one of the quarterly QMAC meetings. This meeting typically occurs as the first meeting of the fiscal year and is used to help set the stage for the following year. At this meeting, the Data Subcommittee presents its year-end findings and QMAC members are asked to vote on a slate of statewide QI project activities that will take place over the following year.

Since new member orientation happens the evening before the QM Summit, there is a substantial welcoming and ice-breaking feature on the first day to help warm up the membership together. Unlike standard QMAC meetings, there is a greater training focus in the QM Summit. While there is an opportunity for committees to touch base and for new members to be oriented to their tasks, it is expected that the build of committee acclimation will occur between buddies and on standard subcommittee team calls. Instead, breakout groups are focused on training and acclimation.

VIRGINIA CONSUMER ADVISORY COMMITTEE TRAINING

VACAC members are included in all the training activities mentioned above, but added supports are available for PLWH who want to participate in the QMAC. The Training of Consumers in Quality (TCQ) is offered semi-annually for PLWH across Virginia to gain health numeracy skills to compliment the health

literacy skills that are commonly taught in clinics as medical case management intervention. In this training, consumers train consumers using actual Virginia data to raise their competency and confidence to participate in QMAC discussions that are heavy on health care data.

As with other types of training, there are virtual training opportunities available to PLWH beyond the face-to-face TCQ training. Consumers are welcome and encouraged to travel to QMAC the evening before the meeting to discuss application of learning and to frame their perspective on the next day's agenda.

QMAC MEMBER APPLICATION FORM

Date: _____ Source/Referral_____

Representation: _____

Name _____

Mailing Address _____

_____

Phone # (W) _____ (Cell Phone) _____

(H)_____ (Fax) _____

E-Mail _____

Conflict of Interest _____

Present Employment_____

_____

Please state your qualifications, interest and/or reasons for wanting to be a member of the QMAC.

_____
_____
_____
_____

Interviewed by: _____ through phone_____ e-mail _____ letter _____

Comments:

Approval:

Chair_____ Date _____

VDH_____ Date _____