

**Santa Cruz County Health services Agency**

**RW Part C**

**PDSA Using Annual HIV Screening Panel**

**6/19**

**Problem/Background:**

Inadequate screening for measures stated below, as reflected in quarterly performance measure reports and HRSA site review.

Performance Measure report from 4/1/18 to 3/31/19 baseline data:

Lipid Screening at 51 %

Urinalysis at 7 %

TB screening at 54 %

Urine GC/Chlamydia Screening-not measured, but this was a negative finding in the HRSA site review.

**Performance Goal:**

At least 80% of patients to meet screening criteria for GC/Chlamydia, TB, lipids and U/A, as reflected in quarterly performance reports

**Plan:**

1. Develop new HIV annual lab panel (SCZ HIV Annual) to include Urine GC/Chlamydia, TB quantiferon gold, urinalysis and lipid panel.
2. Use newly developed annual HIV lab panel to help improve the outcomes of our above stated performance measures.
3. Define/update measures for above criteria. Add Urine GC/Chlam measure to performance report. Delete STD screening measure and replace with 2 separate measures for RPR and Urine GC/Chlam.
4. All HIV providers to agree to start using HIV annual lab panel once a year for all HIV patients on the clinic HIV roster. HIV Medical Director to

communicate new standard to providers and implementation date by 10/1/19.

5. Review and analyze quarterly reports in April, 2020 (ie after 6 months) to confirm anticipated improvement trends. Compare to baseline data. Re-assess course of action as needed.
6. Final analysis and action plan after 4 quarterly reports from initiation date (October, 2020).