

# Minutes for Miracle of Love Inc. Clinical Quality Management 5th Committee (2024-2025)

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## Call to Order

The fourth session meeting of the 5<sup>th</sup> Miracle of Love Inc. (MOL) Clinical Quality Management Committee (CQM Committee) was held on September 16th, 2025, at the MOL Orlando Office and virtually. It began at 1:11 pm and was presided over by Julian Vega, with Denise Wilcox as Secretary.

## Attendees

Voting members in attendance included: **Angus Bradshaw, Wyatt Haro, Janice Romano, Jessica Santana, Julian Vega, Denise Wilcox, and Mulan Williams.**

Members not included:

## Approval of Minutes

The minutes for the September 16th meeting will be approved for the next meeting, held on January 20th, 2026, by unanimous consent.

## Officers' Reports

Robert's Rules of Order was presented by **Mulan Williams**

Ryan White Part A (Referral Specialist & Intensive) - **Jessica Santana**

HOPWA (All Parts) - **Julian Vega**

TOPWA - **Denise Wilcox**

Ryan White Part B (Early Intervention) & Prevention – **Mulan Williams**

Quality Management - **Wyatt Haro**

Agency Updates - **Angus Bradshaw**

## Other Reports

The Lake County Client Advisory Board was presented by - **Janice Romano.**

Transgender Outreach / Support Updates - **Mulan Williams**

## Unfinished Business

QM Plan 2030 Goals – **Angus Bradshaw**

Term 2025 Goals / Workplan – **Wyatt Haro** – (Struck from the Agenda)

AIM Statement for QI Project – **Wyatt Haro**

**New Business**

Modification of ICM Performance Measure – **Jessica Santana**

Removal of SAMHSA Performance Measures – **Wyatt Haro**

Employee Satisfaction Survey – November Dates – **Wyatt Haro**

**Main Motions**

Motion to withdraw the modification of the ICM Performance Measure. Motion was approved by Unanimous consent.

**Open Floor**

**Adjournment**

Julian Vega moved that the meeting be adjourned, and this was agreed upon at 4:17 pm.

  
\_\_\_\_\_  
Julian Vega, Chair  
Miracle of Love Inc. Quality Management Committee

1/20/2026  
Approval Date

  
\_\_\_\_\_  
Denise Wilcox, Secretary  
Miracle of Love Inc. Quality Management Committee

1-20-2026  
Prepared Date

Received | Faxed | Submitted | Resolved  
Other \_\_\_\_\_  
Date 20 JAN 2026

**Wyatt Haro, MSW**

## Summary of Reports/ Presentations

### **Roberts's Rules of Order Review – Mulan Williams, Parliamentarian**

To keep meeting flows and ensure that everyone is given an opportunity to speak, please wait to be recognized by the chair.

To make a motion, raise your hand and, upon recognition from the chair, you can make your motion. To move forward, the motion must be seconded by another member.

### **Reports of Officers**

#### **Ryan White Part A 9 Referral Specialist & Intensive**

RS – average case load 170- 230 and ICM 22-26 ( On Target )

Total Assigned 1214

Medical Case Manager 206

Expired 19

90 Day Report

4.4% Wellness Check (1,239)

Expired Eligibility 1.5%

### **HOPWA**

#### **August Updates**

Short-term housing, PHP, and Hotel – 203 clients served

TBRA– 49 clients served

Home visits – 48 home visits were conducted out of 48

Reducing the target from 98% to 96%, the target goal is unfair to achieve. The target goal should be reduced to 97%

### **TOPWA**

The total number of clients served is 121, and 35 clients are positive. For July 2025, there were 2 births to report. For August, there are projected 4 positive births. TOPWA linked 3 POZ linked to care.

#### **Ryan White Part B (Early Intervention) & Prevention**

Numbers for Ryan White Part B EIS case load is 4, and the Numerator is 2 (Early diagnosed with linkage to care)

Number of out-of-care CLT – 9 (None reported scheduled appointments)

## **Prevention**

HIV – New Diagnosed - 1 (Linkage completed in 7 days)

STI – 12 out of 14 (Linkage completed in 7 days)

PrEP Referral – 2 (Completed and prescribed)

New Diagnosed – 100%

STI – 85.71

Prep – 100%

## **Quality Management**

Comment button is working; identifier has been removed. Only positive comments can be viewed on the dashboard.

92.77% Goal to achieve is 95%

83 Surveys were completed

Every served = 1 entry for the number of surveys taken

Results can be found on the dashboard under surveys.

All new documents have been signed and updated, Translated and ready for use.

QI project Scrub for next year

November will be the next employee survey

Food Card Next November

## ***Lake County Client Advisory Board – Janice Romano***

The Lake County Client Advisory Board had 4 clients to attend the meeting. So far, only four clients attended on 9/10/2025. The next meeting will be held on 10/8/2025.

2 new clients attended

CLT participated in a Jeopardy Game for the meeting.

## **Transgender Outreach / Support Updates**

Extend outreach testing to be offered 2 times a week

Outreach Transgender group therapy session will be held on 9/24/2025 at the Stafford house and open to the public

Divas and Dialogue Job Readiness class will be held on 11/31 and 12/5

## **Unfinished Business**

Process Map: Help RW and HOPWA final step of improvement to help with the intake process

Create a PDF that would use autofill to help with the enrollment process

PDSA – workplan – PDF (Digital Documentation) January 2026 Agenda

QM Plan 2030 Goal

Move to Vote Electrical of officers of the Season

Term 2025 Goals / Workplan

AIM statement for QI Reports

SAMHSA – Date voted and passed to remove

Employee Satisfaction to open 12:00 Am Monday 11/3/2025 and close 11:59 Friday 11/14/2025

The next meeting will be held on January 20<sup>th</sup>, 2026