

Universal Standards of Care

Introduction

In an effort to promote its vision for an effective, compassionate and comprehensive system of HIV/AIDS health care services for the diverse community of Santa Clara County, the Planning Council has initiated the development of Universal Standards of Care. These quality standards have been developed in partnership with the Planning Council and the Administrative Agent, which is responsible for initiation of use of these standards (through their service contracting process) and an on-going monitoring of compliance at the individual service provider level throughout the funding cycle.

Through the use of quality standards, the Planning Council will strengthen the development of a service system that supports client centered service which address: individual client needs and cultural diversity, client self-determination relative to management of care, integration of services for increased accessibility, continuity of care across all stages of the disease process, cost effectiveness, and continued appropriateness of services consistent with changes in the epidemic.

The Universal Standards of Care are the minimum requirements that programs are expected to meet when providing Ryan White funded HIV/AIDS care and services. The standards of care establish the minimum standards intended to help agencies meet the needs of their clients. Providers may exceed these standards.

Goals: The Standards of Care serve as guides to gauge the quality of HIV services in Santa Clara County.

The objectives of the universal standards are to help each service provider achieve their goals by ensuring that programs:

- Have policies and procedures that protect client rights and ensure quality of care;
- Provide clients with access to quality services through experience, trained and when appropriate, licensed staff;
- Provide culturally and linguistically competent services;
- Guarantee client confidentiality, and protect client autonomy;
- Ensure a fair process of grievance review and advocacy; and
- Comprehensively inform clients of services, establish client eligibility and collect information through the intake process.

1.0 Standard of Care: Licensure or Assurance

Objectives:

All providers of Ryan White Services are required to meet the minimum standard of care for the topic of licensure and assurance. The objectives for these standards are:

- All providers comply with professional standards of practice;
- Eligible clients receive services;
- Eligible staff and/or volunteers provide services;
- Staff, contractors, and consultants who provide direct services are licensed and/or certified when required; and
- Ryan White Program Clients have input in the design and delivery services.

1.1 HRSA and other government standards: The Agency shall comply with Health Resources Services Administration (HRSA) standards as well as all federal, state, and local requirements for certification and/or license.

Standard	Measure/Documentation
1.1.1 Staff members are licensed as appropriate to provide services	1.1.1 Copy of license or other documentation in personnel file
1.1.2 Providers employ appropriately credentialed staff	1.1.2 Documentation in personnel file
1.1.3 Providers have access to current Standards of Care from HRSA, CDC, State Office of AIDS, and the Planning Council	1.1.3 Hard copy and/or electronic access of documents

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1.2 SOC: Client Eligibility: The agency shall maintain detailed records in legible form, documenting the eligibility (including, but not limited to, financial qualifications) of each client and demographics for each client at least twice each year. Such records shall be maintained for a minimum of three years. Agency has eligibility requirements for services in written form on request.

Standard	Measure/Documentation
1.2.1 Description of Ryan White Services with eligibility requirements.	1.2.1 Site visit report
1.2.2 HIV status verification	1.2.2 Client record/chart/enrollment forms—proof of HIV status.
1.2.3 Income verification	1.2.3 Client record/chart/enrollment forms—proof of income
1.2.4 Residency of TGA verification	1.2.4 Client record/chart/enrollment forms—proof of residency
1.2.5 Agency Policy and Procedure for determining Eligibility	1.2.5 Agency Policy and Procedure manual
1.2.6 Proof of insurance status	1.2.6 Client record/chart/enrollment form

1.3 SOC: Staff and/or Volunteer Eligibility: All agencies that receive Santa Clara County (SCC) pass-through funds from local, state, or federal sources, must comply with existing local, state, or federal regulations governing the need for a criminal history check of prospective staff or volunteers.

Standard	Measure/Documentation
1.3.1 Agency Policy and Procedure for Criminal History Check for Staff and Volunteers	1.3.1 Agency Policy and Procedure Manual.
1.3.2 Valid criminal history checks are done as required	1.3.2 Documentation in Personnel files

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1.4 SOC: Licensure: All agency staff, contractors, and consultants who provide direct care services and require licensure, shall be properly licensed by the State of California or other appropriate licensing agency. The license shall be available for review upon request.

Standard	Measure/Documentation
1.4.1 Valid license(s)	1.3.1 Documentation in Personnel files.

1.5 SOC: Client Input: The Agency shall have structured and ongoing efforts to obtain input from clients in the design and delivery of services

Standard	Measure/Documentation
1.5.1 Client Satisfaction Surveys	1.5.1 Client Satisfaction Survey Report.
1.5.2 Community Advisory Boards	1.5.2 CAB Reports
1.5.3 Suggestion box or other client input mechanism	1.5.3 Site Visit Report

1.6 SOC: Payment for Services: The Agency shall provide services regardless of an individual's ability to pay for the service

Standard	Measure/Documentation
1.6.1 Policy and Procedure that prohibits denial of services due to inability to pay.	1.6.1 File of clients refused service with reason for denial.

2.0 Standard of Care: Knowledge, Skill, and Experience

Objectives:

All providers of Ryan White Services are required to meet the minimum standard of care for knowledge, skills and experience. The objectives for these standards are:

- Knowledgeable staff and volunteers provide services and referrals; and
- Services are provided in a culturally sensitive manner.

2.1 SOC: Knowledge of HIV/AIDS: Staff and volunteers will have appropriate knowledge of the HIV/AIDS disease process.

Standard	Measure/Documentation
2.1.1 Staff <i>or</i> volunteer resumes or applications demonstrate appropriate knowledge	2.1.1 Documentation in Personnel Files
2.1.2 Attendance at trainings or appropriate Continuing Education	2.1.2 Documentation in personnel file

2.2 SOC: Linkages and Resources: Knowledgeable staff and volunteers provide referrals

Standard	Measure/Documentation
2.2.1 Staff <i>or</i> volunteer resumes or applications demonstrate appropriate knowledge	2.2.1 Documentation in Personnel Files
2.2.2 Attendance at trainings	2.2.2 Documentation in personnel file
2.2.3 An agency resource guide is available to staff and volunteers	2.2.3 Agency resource guide

2.3 SOC: Cultural competency: Staff and volunteers will have cultural competency in working with persons affected by the HIV/AIDS epidemic.

Standard	Measure/Documentation
2.3.1 Agency Policy and Procedure for Cultural competency	2.3.1 Agency Policy and Procedure Manual
2.3.2 Attendance of trainings	2.3.2 Documentation in personnel file
2.3.3 Client Satisfaction Surveys	2.3.3 Client Satisfaction Survey Report

3.0 Standard of Care: Client Rights, Responsibilities, Confidentiality

Objectives:

All providers of Ryan White Services are required to meet the minimum standard of care for client rights, responsibilities, and confidentiality. The objectives for these standards are:

- Clients are made aware of their rights, obligations and services available;
- Clients are made aware of what to do in case of an on-site emergency such as fire or earthquake;
- Client confidentiality is maintained and client files are kept confidential;
- Client will have access to their files as appropriate;
- Any incidents of abuse, neglect or exploitation are reported; and
- Clients are made aware of grievance procedure and grievances are addressed.

The agency shall maintain the following tools and distribute, discuss and/or explain them as indicated in section 3.2;

- Client Bill of Rights and Responsibilities;
- On site emergency and evacuation procedures;
- Release of Information and Release for Site Review; and
- A written abuse and/or neglect policy.

3.1 SOC: Orientation to Services: The Agency shall provide an orientation for clients, during which the clients are made aware of their rights, obligations, and services available to them.

Standard	Measure/Documentation
3.1.1 Client Satisfaction Surveys	3.1.1 Client Satisfaction Survey Report
3.1.2 Agency Policy and Procedure	3.1.2 Agency Policy and Procedure Manual
3.1.3 Client Orientation Checklist	3.1.3 Client record/chart

3.2 SOC: Client Bill of Rights: The Agency shall provide a written copy of the Client Bill of Rights

Standard	Measure/Documentation
3.2.1 Signed receipt of Rights and Responsibilities from clients on their current record	3.2.1 Client record/chart
3.2.2 Client Rights and Responsibilities visibly posted in client areas	3.2.2 Site visit report

3.3 SOC: On-site Emergency and Evacuation Procedures: The Agency shall have written emergency and evacuation procedures.

Standard	Measure/Documentation
3.3.1 Agency Emergency and Evacuation Procedure visibly posted in client areas	3.3.1 Site visit report

3.4 SOC: Release of Information: The Agency shall have a “Release/Exchange of Information” form, to be signed by the client prior to the release/exchange of any information about the client.

Standard	Measure/Documentation
3.4.1 Signed Release of Information from client	3.4.1 Client record/chart
3.4.2 Agency Policy and Procedure for Release of Information	3.4.2 Agency Policy and Procedure Manual
3.4.3 Signed Release of Information for the Aries data system	3.4.3 Release of Information for Aries data system in client record/chart

3.5 SOC: Abuse/Neglect: The Agency shall have a written policy and procedure to ensure that any incidents of abuse, neglect or exploitation of clients are reported to the proper authorities, unless otherwise forbidden by law (i.e. Attorney/Client privilege)

Standard	Measure/Documentation
3.5.1 Agency Policy and Procedure for Abuse or Neglect	3.5.1 Agency Policy and Procedure Manual

3.6 SOC: Grievances: The Agency shall maintain a grievance procedure, which provides for the objective review of client grievances and alleged violations of universal and service standards.

Standard	Measure/Documentation
3.6.1 Agency Policy and Procedure for grievances	3.6.1 Agency Policy and Procedure Manual
3.6.2 Grievance Procedure visibly posted in client areas	3.6.2 Site Visit Report
3.6.3 Client Informed of Grievance Process	3.6.3 Signed Receipt of Grievance Procedure in client record/chart from orientation and each certification or re-certification

3.7 SOC: Confidentiality: All agencies shall comply with all applicable federal, state, and local laws, rules and regulations (“Laws”) including without limitations to the Health Insurance Portability and Accountability Act (HIPPA) (42 USC sections 1320d et Seq.)

Standard	Measure/Documentation
3.7.1 Agency Policy and Procedure for Confidentiality	3.7.1 Agency Policy and Procedure Manual
3.7.2 Signed receipt of Agency Confidentiality Policy	3.7.2 Client record/chart
3.7.3 Confidentiality training required of all staff and volunteers	3.7.3 Documentation in Employee/Staff files

3.8 SOC: File Storage: The Agency shall maintain client files in a locked and secure area. The agency shall develop, maintain and enforce a Security Policy regarding how electronic client data are accessed, edited, and deleted.

Standard	Measure/Documentation
3.8.1 Agency Policy and Procedure for file storage	3.8.1 Agency Policy and Procedure Manual
3.8.2 Client record/charts should be in a secure area with appropriate access	3.8.2 Site visit review

3.9 SOC: Access to Files: Client files will be available to the client upon written request as allowed by law.

Standard	Measure/Documentation
3.9.1 Signed Release of Information to self	3.9.1 Client record/chart

4.0 Standard of Care: Access to Services

Objectives:

All providers of Ryan White Services are required to meet the minimum standard of care for accessibility. The objectives for these standards are:

- All clients are treated equally;
- Services are provided in a culturally sensitive manner;
- Services are provided in an efficient manner;
- Urgent and/or emergency physical and/or psychiatric needs are rapidly addressed;
- Services are provided in a safe environment; and
- Services are provided to the disabled with consideration of special needs and accessibility issues.

4.1 SOC: Nondiscrimination: The agency shall, except where grant funds may be specifically restricted (e.g. Minority AIDS Initiative (MAI)/ Congressional Black Caucus (CBC) funds), provide its services to eligible persons (those living with HIV/AIDS) regardless of gender, race, color, religion (or lack thereof), national origin, age, sexual orientation, political affiliation, disability, or inability to pay to the extent resources allow. The Agency shall abide by the Santa Clara County Non Discrimination Policy.

Standard	Measure/Documentation
4.1.1 Agency Policy and Procedure for Non-discrimination	4.1.1 Policy and Procedure Manual
4.1.2 Client Satisfaction Survey	4.1.2 Satisfaction Survey Report

4.2 SOC: Cultural competency: The agency shall provide culturally sensitive programming for clients, and shall address linguistic and other barriers, and actively work to remove them. The agency shall ensure accessibility to diverse cultures and communities that demonstrate risk and need.

Standard	Measure/Documentation
4.2.1 Agency Policy and Procedure for cultural competency	4.2.1 Agency Policy and Procedure Manual
4.2.2 Staff training for cultural competency	4.2.2 Documentation in Employee/Staff file
4.2.3 Cultural Competency assessment of Agency	4.2.3 Cultural Competency assessment report

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4.2.4 Client Satisfaction Surveys	4.2.4 Client Satisfaction Survey Report

4.3 SOC: Client Service Efficiency: The agency shall provide an efficient, non-judgmental and expedient process to respond to client requests, including completion of intakes by appointment, on or off-site.

Standard	Measure/Documentation
4.3.1 Documentation of client requests for services and response	4.3.1 Client record/chart
4.3.2 Documentation that orientation to services took place within 30 days of admission to services	4.3.2 Client record/chart/orientation checklist
4.3.3 Site visit	4.3.3 Site visit report

4.4 SOC: Emergency Need: The agency shall provide mechanisms to address urgent and/or emergency medical or psychiatric client needs.

Standard	Measure/Documentation
4.4.1 Agency Policy and Procedure for addressing urgent and emergency medical or psychiatric needs	4.4.1 Agency Policy and Procedure Manual

4.5 SOC: Safe Environment: The agency has established policy for ensuring safety of all clients, staff and others on the premises. This shall include, adopting a written policy regarding a refusal of services to anyone who is being verbally abusive of staff and others, is threatening physical abuse to staff and others, is in possession of illegal substances or weapons on agency property, or is otherwise acting in an unacceptable manner, until, in the judgment of the agency the individual ceases such behavior. The agency shall also explore all available options for service provision to such individuals.

Standard	Measure/Documentation
4.5.1 Agency Policy and Procedure for refusal of services	4.5.1 Agency Policy and Procedure Manual
4.5.2 Site visit	4.5.2 Site visit report

4.6 SOC: Disability: The agency shall provide access for disabled persons such as TTY, large print, voice recorded information, wheelchair ramps or other Americans with Disability Act requirements.

Standard	Measure/Documentation
4.6.1 Agency Policy and Procedure for compliance with the Americans With Disabilities Act.	4.6.1 Agency Policy and Procedure Manual
4.6.2 Site visit	4.6.2 Site visit report

5.0 Care and Treatment

Objectives:

All providers of Ryan White Services are required to meet the minimum standard of care for care and treatment. The objectives for these standards are:

- Client intake, orientation, and evaluation is done in a timely manner;
- Clients are involved in their care;
- Clients have easy access to services and information on an ongoing basis;
- Clients are aware of and partake of services in the San Jose TGA;
- Risk reduction education is provided; and
- Clients have a written Plan of Care.

5.1 SOC: Intake, Orientation, Evaluation: The agency shall conduct timely intake, orientation, evaluation, and initial treatment of each client within 30 days.

Standard	Measure/Documentation
5.1.1 Agency Policy and Procedure for Intake, Orientation, and Evaluation of Clients	5.1.1 Agency Policy and Procedure Manual
5.1.2 Orientation Checklist	5.1.2 Client record/chart
5.1.3 Client Plan of Care, Individual Service Plan, or other “planning” document.	5.1.3 Client record/chart
5.1.4 Site visit	5.1.4 Site visit report

5.2 SOC: Oversight/Supervision: The agency shall provide periodic professional oversight of service delivery by a qualified person.

Standard	Measure/Documentation
5.2.1 Agency Job Descriptions describing staff supervision.	5.2.1 Personnel files

5.3 SOC: Empowerment: The agency shall promote, support, and empower the involvement of clients in their own care process

Standard	Measure/Documentation
5.3.1 Plan of Care discussed and signed by clients	5.3.1 Client record/chart

5.4 SOC: Availability: The agency shall be available to clients via telephone, on a walk-in basis, if possible, or through written correspondence should they require additional information, referrals, or support.

Standard	Measure/Documentation
5.4.1 Agency Policy and Procedure for client access to services	5.4.1 Agency Policy and Procedure Manual

5.5 SOC: Linkage: The agency shall inform individuals of the availability of HIV-related services and how to access them

Standard	Measure/Documentation
5.5.1 Clients are referred to appropriate Ryan White and Non-Ryan White services	5.5.1 Client record/chart
5.5.2 An Agency Resource Guide is available	5.5.2 Agency Resource Guide

5.6 SOC: Risk Reduction Education: The agency shall provide risk reduction education to prevent the spread of HIV as well as education on prevention of opportunistic infections as appropriate.

Standard	Measure/Documentation
5.6.1 Agency Policy and Procedure for Health Education and Risk Reduction	5.6.1 Client record/chart
5.6.2 Client satisfaction survey	5.6.2 Client Satisfaction Survey Report

5.7 SOC: Discharge from Care: The agency may discharge a client if:

- Client is determined to be self sufficient with respect to participation in HIV care
- Client fails to qualify for Ryan White services
- Client put the agency, staff, volunteers, or other clients at risk of harm
- Client requests discharge
- All discharged clients shall have a written explanation for discharge as well as a Plan of Care or other planning document.

Standard	Measure/Documentation
5.7.1 Agency Policy and Procedure for Discharge of Clients	5.7.1 Agency Policy and Procedure Manual
5.7.2 Written discharge instructions with Plan of Care, Individual Service Plan, or other “planning” document.	5.7.2 Client record/chart
5.7.3 Site visit	5.7.3 Site visit report

6.0 Outreach and Provider Continuity

Objectives:

All providers of Ryan White Services are required to meet the minimum standard of care for outreach and provider continuity. The objectives for these standards are:

- The agency has an outreach plan and conducts outreach activities;
- Clients are linked to all Ryan White and Non-Ryan White services for which they qualify; and
- The agency collaborates with other services.

6.1 SOC: Outreach: The agency shall submit an outreach plan for its Ryan White Program supported services.

Standard	Measure/Documentation
6.1.1 A written outreach plan is available	6.1.1 Agency outreach plan
6.1.2 Site visit	6.1.2 Site visit report

6.2 SOC: Professional Linkages/Collaboration: The agency shall develop and maintain linkages with primary health care, support and other access service providers, and enter into Memoranda of Agreement or Understanding with agencies as appropriate to ensure that client services within the continuum of care are coordinated as needed.

Standard	Measure/Documentation
6.2.1 Memorandum of Agreement, Memorandum of Understanding, or other method of cooperation with local service providers	6.2.1 Memoranda of Agreement/Understanding or other evidence of cooperation/collaboration
6.2.2 Agency Policy and Procedure for professional linkage	6.2.2 Agency Policy and Procedure Manual

7.0 Continuous Quality Improvement

Objectives:

All providers of Ryan White Services are required to meet the minimum standard of care for quality improvement. The objectives for these standards are:

- The agency shall produce a regular data report given to the Grantee, the results of which are shared with the Planning Council;
- Client outcomes drive individual Plan of Care;
- The agency maintains a Continuous Quality Improvement Program; and
- Performance measures and outcomes are documented.

7.1 SOC: Data and Record Keeping: The agency shall routinely track, record, and report client outcomes in determining need for revisions to individual client Plan of Care

Standard	Measure/Documentation
7.1.1 Clear documentation of client outcomes in the client Plan of Care with revisions reflective of changing client needs.	7.1.1 Client Plan of Care, Individual Service Plan, or other “planning” document.

7.2 SOC: Plan of Care: The agency shall consider client outcomes in determining need for revisions to Client Plan of Care, Individual Service Plan, or other “planning” document.

Standard	Measure/Documentation
7.2.1 Clear documentation of client outcomes in the Client Plan of Care, Individual Service Plan, or other “planning” document with revisions reflective of changing client needs.	7.2.1 Client Plan of Care, Individual Service Plan, or other “planning” document.

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7.3 SOC: Evaluation: The agency shall develop and utilize a mechanism of annual evaluation to identify program areas that are in need of improvement, updating, etc. This mechanism should include, at a minimum, consideration of the changing needs of the client, level of achievement of desirable client outcomes, and client satisfaction/dissatisfaction with services. The agency shall participate in the STD/HIV Program Office Quality Management Plan Work Group.

Standard	Measure/Documentation
7.3.1 Agency Quality Management Plan in place.	7.3.1 Quality Management Report
7.3.2 Client satisfaction survey	7.3.2 Client Satisfaction Survey Report

7.4 SOC: Indicators and Outcome Measures: Provider performance outcomes are to be assessed using HIV/AIDS Bureau (HAB)/ HRSA recommended clinical performance measures, as well as Planning Council approved measures.

Standard	Measure/Documentation
7.4.1 Agency Quality Management Policy and Procedure	7.4.1 Policy and Procedure Manual and QM Report
7.4.2 Site visit	7.4.2 Site visit report

8.0 Standard of Care: Staff Training

Objectives:

All providers of Ryan White Services are required to meet the minimum standard of care for staff training. The objectives for these standards are:

- Staff and volunteers deliver safe and high quality services;
- Staff is appropriately licensed; and
- Staff is well educated and education is appropriate for job description.

8.1 SOC: Orientation/In-service: The agency shall provide initial in-service, orientation, and training for new staff and volunteers—to include Universal Precautions, and periodic staff development training and case conferences for all staff and volunteer required to ensure continued delivery of high quality services.

Standard	Measure/Documentation
8.1.1 Policy and Procedure regarding new staff orientation	8.1.1 Policy and Procedure Manual

8.3 SOC: Training: The agency shall provide appropriate training and updates including cultural competency.

Standard	Measure/Documentation
8.3.1 Staff attends HIV update trainings	8.3.1 Personnel records

8.4 SOC: Continuing Education: The agency shall provide the opportunity for licensed/credentialed staff to take relevant outside courses to both improve their skills and earn CEUs sufficient to maintain licensure.

Standard	Measure/Documentation
8.4.1 Policy and Procedure for continuing education	8.4.1 Policy and Procedure Manual

References:

- Boston Public Health Commission (2009) *Standards of Care for HIV/AIDS Services*
- FY 2010 Dallas EMA/HSDA, Standards of Care, Effective March 1, 2010
- Los Angeles County Commission on HIV, Standards of Care 2009
- FY 2009 San Antonio TGA/HSDA, Uvalde HSDA & Victoria HSDA, Standards of Care for HIV/AIDS Services
- **Health Resources and Services Administration (HRSA) HIV/AIDS Bureau (HAB)**, Division of Service Systems, Monitoring Standards for Ryan White Part A and B Grantees: Part 1: Universal Standards, April 2012. <http://hab.hrsa.gov/>