

ATLANTA EMA UNIVERSAL QUALITY MANAGEMENT STANDARDS AND MEASURES

Purpose

The purpose of the Ryan White Part A quality management standards and measures is to ensure that a uniformity of service exists in the Atlanta Eligible Metropolitan Area (EMA) such that the consumers of a service receive the same quality of service regardless of where the service is provided. If an agency is unable to meet a particular standard, the agency must document why the standard was unable to be met and explain the steps it is taking to meet that standard.

Application of Standards

These standards apply to all agencies that are funded to provide Ryan White Part A services in the Atlanta EMA.

Standards Development Process

The standards were developed through extensive background research on quality management standards, a review of existing standards from other Ryan White Part A EMAs, meetings of various task forces and committees of the Atlanta HIV Health Services Planning Council and meetings with the Ryan White Part A Grantee.

Acknowledgements

Fulton County would like to thank all of the EMAs that shared their standards, as well as the members of the various task forces and committees who gave generously of their time to provide valuable input to the development of these quality management standards and measures.

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I. Policies and Procedures	
Standard	Measure
A. Agency must have policies and procedures in place that address confidentiality (HIPAA), grievance procedures and supervision requirements per federal and state law.	<ul style="list-style-type: none"> • Policy and procedure manual • Grievance procedure posted in visible location
B. Agency has eligibility requirements for services in written form. This is inclusive of: <ul style="list-style-type: none"> ✓ Clients rights and responsibilities ✓ Release of information/confidentiality ✓ Eligibility for services 	<ul style="list-style-type: none"> • Policy on file
C. Agency is licensed and/or accredited by the appropriate city/county/state/federal agency.	<ul style="list-style-type: none"> • Current licensure on file from appropriate city/county/state/federal agency
D. Agency has written policies and procedures in place that protect the physical safety and well-being of staff and clients. This is inclusive of: <ul style="list-style-type: none"> ✓ Physical agency safety <ul style="list-style-type: none"> • Meets fire safety requirements • Complies with Americans with Disabilities Act (ADA) • Is clean, comfortable and free from hazards • Complies with Occupational Safety and Health Administration (OSHA) infection control practices ✓ Crisis management and psychiatric emergencies <ul style="list-style-type: none"> • How to assess emergent/urgent vs. routine need • Verbal intervention • Non-violent physical intervention • Emergency medical contact information • Incident reporting • Voluntary and involuntary inpatient admission ✓ Refusal of services ✓ Personnel <ul style="list-style-type: none"> • Roles and responsibilities of staff, including supervision responsibilities and staff/client ratio ✓ Client/Parent/Guardian Rights and Responsibilities (see Standard IV) 	<ul style="list-style-type: none"> • Policy on file • Site visit
E. Agency has a formal relationship with a mental health/substance abuse professional for consultation as needed if a mental health/substance abuse professional is not on staff.	<ul style="list-style-type: none"> • Written letter of agreement on file

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I. Policies and Procedures (continued)	
Standard	Measure
F. Agency has private, confidential office space for seeing clients (e.g. no half-walls or cubicles, all rooms must have doors).	<ul style="list-style-type: none"> • Site visit
II. Program Staff	
Standard	Measure
A. Staff are trained and knowledgeable about HIV/AIDS and available resources.	<ul style="list-style-type: none"> • Personnel Records
B. Staff have appropriate skills, relevant experience, cultural and linguistic competency and relevant licensure to provide services and/or care to people living with HIV. All staff are properly trained to meet the staff qualifications of their position as defined in the Atlanta EMA quality management standards.	<ul style="list-style-type: none"> • Staff résumés in personnel files • Personnel and training records
C. Staff have a clear understanding of their job description and responsibilities as well as agency policies and procedures.	<ul style="list-style-type: none"> • Written job description that includes roles and responsibilities and a statement of having been informed of agency policies and procedures in file signed by staff/volunteer & staff/volunteer supervisor
D. Staff will complete appropriate training within the time frame set forth in the Atlanta EMA quality management standards.	<ul style="list-style-type: none"> • Signed form attesting to completion of training in personnel file • Signed confidentiality agreement in personnel file
E. Staff will participate in job-related education/training as set forth in the Atlanta EMA quality management standards.	<ul style="list-style-type: none"> • Training/education documentation in personnel files
F. Staff will receive supervision by their supervisor as set forth in the Atlanta EMA quality management standards.	<ul style="list-style-type: none"> • Personnel files
III. Access to Services	
A. Agency is accessible to desired target populations. Accessibility includes: <ul style="list-style-type: none"> ✓ proximity to community ✓ proximity to mass transit ✓ proximity to low-income individuals ✓ proximity to underinsured or uninsured individuals ✓ proximity to individuals living with HIV 	<ul style="list-style-type: none"> • Site visit • Agency client data report consistent with funding requirements

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III. Access to Services (continued)	
Standard	Measure
B. Agency demonstrates the ability to provide culturally and linguistically competent services according to Atlanta EMA standards for desired target population.	<ul style="list-style-type: none"> • Personnel and training records • Site visit • Client satisfaction survey • Agency client data report consistent with funding requirements
C. Agency demonstrates input from clients in the design and delivery of services.	<ul style="list-style-type: none"> • Existence of Consumer Advisory Board (CAB); if agency does not have a CAB, it may ask for client input from the Consumer Caucus or other agencies' CABs • Client satisfaction survey
D. Agency is compliant with ADA requirements for non-discriminatory policies and practices and for the provision of reasonable accommodations to address communication (i.e. sign language interpreter).	<ul style="list-style-type: none"> • Policy on file
IV. Eligibility Determination/Screening	
A. Provider determines client eligibility for services. Client eligibility will be reassessed every 6 months. The process to determine client eligibility must be completed in a time frame so that screening is not delayed. Eligibility assessment must include at a minimum: <ul style="list-style-type: none"> ✓ Proof of HIV status ✓ Proof of income ✓ Proof of residency ✓ Proof of active participation in primary care or documentation of the client's plan to access primary care <ul style="list-style-type: none"> • At least 1 visit with a primary care provider every 6 months • For affected children <4, at least 1 primary care visit within 12 months 	<ul style="list-style-type: none"> • Client record • Policy on file • Agency client data report consistent with funding requirements
V. Service Coordination/Referral	
A. Agency staff act as a liaison between the client and other service providers to support coordination and delivery of high quality care. For those clients not in primary medical care, agency staff must note progress toward linking the client into primary medical care.	<ul style="list-style-type: none"> • Client record – documentation of with whom staff are communicating and progress to linking client to primary care

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VI. Clients' Rights and Responsibilities	
A. Client confidentiality policy exists for all service settings.	<ul style="list-style-type: none"> • Policy on file
B. Agency grievance policy exists.	<ul style="list-style-type: none"> • Policy on file
C. A current (in the last year) release of information form exists for each specific request for information and each request is signed by client.	<ul style="list-style-type: none"> • Policy on file • Client record
D. Client will be informed of the client confidentiality policy, grievance policy, their rights and responsibilities and their eligibility for services at first face to face contact.	<ul style="list-style-type: none"> • Documentation in client chart initialed or signed by client (chart review) showing that they have read or been informed