



**Cross Cutting Standards and Performance Indicators**

Framing statement:

The cross cutting standards are not specific to any particular service category, but are category wide standards applicable to ALL service categories.

Quality Standard	Indicators	Evidence is required examples may include:	Means of Verification (MoV)
1. Access	A. Agency informs clients about the availability and accessibility of its HIV/AIDS services	<ul style="list-style-type: none"> <li>Mock intake indicates client is informed about services provided.</li> <li>Service information posted or otherwise visible to client</li> </ul>	MI, CP
	B. Service hours respond to the range of client needs, and/ or referrals for services	<ul style="list-style-type: none"> <li>Posted hours indicate times service is available and procedure to access after hours care</li> </ul>	CP, CCSR, FT
	C. At other times referral information or alternative arrangements for emergencies are available.	<ul style="list-style-type: none"> <li>Review of Policies and Procedures indicates compliance. Example may include phone system</li> </ul>	CCSR, CP
	D. Waiting times during service delivery and for initial appointment are reasonable based on existing resources	<ul style="list-style-type: none"> <li>Examine appointment system, client satisfaction surveys and other documentation (Quality Improvement projects, patient visit redesign or flow analysis)</li> <li>Consumer panel indicates reasonable waiting times</li> </ul>	CCSR
	E. Services are accessible by public transportation or through arrangement with travel providers with Ryan White CARE Act funding	<ul style="list-style-type: none"> <li>Procedure to obtain information, tokens or reimbursement for transportation is in place</li> <li>Client or agency records documenting transportation requests and outcomes</li> <li>Linkage agreements with AFC or other agencies providing transportation resources</li> </ul>	CP, FT, CCSR
	F. Services are provided to the client on a sliding scale based upon income	<ul style="list-style-type: none"> <li>Review of promotional materials indicates compliance.</li> <li>Review of policies and procedures (fee structure) indicates compliance</li> <li>Review of consumer satisfaction surveys indicates compliance</li> </ul>	FT, MI, CP
	G. Agency assures that services are available to individuals with disabilities, including but not limited to persons who are hearing, mobility, visually / or cognitively impaired, or agency provides arrangements to serve these clients	<ul style="list-style-type: none"> <li>Americans with Disabilities Act is complied with wherever possible. Important examples include but are not limited to: accessible entrances are publicized or have clear signage and specific accommodations for people with visual and hearing limitations are present and promoted</li> </ul>	CCSR

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2. Service coordination	<p>A. Agency referral and linkage system is in place and documented - includes referral procedures and system to track completed referrals</p> <p>B. Staff receives adequate current information about services in the community to facilitate appropriate referrals</p>	<ul style="list-style-type: none"> <li>• Current linkage agreements are in place</li> <li>• Referrals and linkages outcomes are documented in client chart</li> <li>• Logs and agenda: Staff training</li> <li>• Review of Policies and Procedures indicates compliance</li> </ul>	<p>CCSR CR</p> <p>CCSR CCSR</p>
3. Cultural Competency	<p>A. A plan is in place and documented to assess what is necessary within the agency to assure culturally competent services and a timeline for implementation</p> <p>B. Services are conducted using language and methods sensitive to the communities served and provide opportunities for clients to assist in identifying issues related to culture, such as primary language, spirituality needs, disability status, age, sexual orientation, sexual practices, gender, communities with which one identifies, family needs, customs, socio-economic status, homelessness, and substance use</p>	<ul style="list-style-type: none"> <li>• Review of policies and procedures indicates compliance</li> <li>• Ongoing staff training in cultural competence is documented as part of new staff training and as part of on-going (at least annual) in-service training. [CCSR—see agenda and handouts]</li> <li>• Demographic profile of staff matches that of the community served</li> <li>• Written materials for clients are in the primary language of the communities served.</li> <li>• Intake process provides the opportunity for clients to discuss issues specific to their culture and needs.</li> <li>• Current community resource service directories are available to staff as well as clients for needs that exceed agency services, as documented in staff reports and client surveys</li> </ul>	<p>CCSR CCSR</p> <p>CCSR</p> <p>FT, CCSR</p> <p>MI</p> <p>FT</p>
	<p>B. Interpretation, literacy, and translation services are in place for all clients (on-site or by referral) and documented. Where client base does not warrant translator, agency works with client to accommodate differing language and literacy needs. Policy/protocol is in place regarding qualifications, standards, and availability of translators (or translator services)</p>	<ul style="list-style-type: none"> <li>• Review of policies and procedures indicates compliance</li> <li>• Review of consumer satisfaction surveys indicates compliance</li> </ul>	<p>CP, CCSR CCSR</p>

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4. Quality Management	A. Agency has a system to identify accepted guidelines and best practices and changes in them. Adhere to HRSA performance indicators where they exist	<ul style="list-style-type: none"> <li>Documentation that agency has adopted and implemented the HRSA performance indicators or other guidelines</li> <li>Documentation on HRSA performance indicators in client/patient charts</li> <li>Review of Policies and Procedures indicates compliance</li> </ul>	Submission of QM plan to CDPH, CCSR CR CCSR
	B. There is an organized continuous quality improvement (CQI) program, with quality review procedures appropriate to the funded service	<ul style="list-style-type: none"> <li>Review of Policies and Procedures]</li> <li>Chart reviews summaries</li> <li>QM reports, minutes or memos</li> </ul>	CCSR CCSR CCSR
	C. Agency institutes and utilizes ongoing system for collecting and analyzing client level data	<ul style="list-style-type: none"> <li>Review of the QM plan</li> <li>Review of agency's IT system</li> <li>Review of QM data report</li> </ul>	Submission of QM plan to CDPH, CCSR CCSR CCSR
	D. A mechanism is in place to obtain client feedback on service delivery and incorporate findings into service delivery	<ul style="list-style-type: none"> <li>Review of consumer satisfaction survey indicates compliance</li> <li>Review of other client input mechanism (suggestion box, client advisory board, focus groups) indicates compliance</li> </ul>	CCSR CP, CCSR
	E. Agency assures that all services are provided by professionals qualified and competent in the applicable discipline and appropriately licensed, if required by law. Written criteria of qualifications for hiring staff, consultants, volunteers, and students are in place and adhered to, with efforts made to attract and train developing professionals representing the communities served	<ul style="list-style-type: none"> <li>Personnel records document current qualifications and if appropriate licensing or certification.</li> <li>Hiring policies and procedures ensures qualified staff</li> <li>Appropriate supervision is provided</li> <li>Training records for volunteers and students</li> </ul>	CCSR CCSR CCSR CCSR
	F. The agency will provide supervision appropriate to meet service delivery and staff needs emphasizing accountability, ethical practice and behavior and skills building for all levels of service providers, and this will be documented as needed	<ul style="list-style-type: none"> <li>Policies and Procedures Manual contains documentation of supervisory policies and procedures.</li> <li>Personnel files contain documentation of supervision</li> <li>Chart reviews</li> </ul>	CCSR CCSR CR

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<p>5. Staff is qualified to do their job and is provided education and training necessary to provide quality services</p>	<p>A. Staff receives ongoing training in use of guidelines and best practices for specific services provided</p>	<ul style="list-style-type: none"> <li>Review of policies and procedures indicates compliance</li> <li>Logs and agenda: Staff training</li> <li>Review of employee records indicates compliance</li> </ul>	<p>CCSR CCSR CCSR</p>
	<p>B. Agency supports its staff in personal and professional development to assure quality service delivery</p>	<ul style="list-style-type: none"> <li>Staff have adequate vacation, bereavement, and personal leave as indicated in Policies and Procedures Manual</li> <li>Staff have regular supervision with attention to burnout and stress as indicated in Policies and Procedures Manual</li> </ul>	<p>CCSR CCSR</p>
	<p>C. Providers have basic and current level of medical knowledge about HIV/AIDS, both in general and about specific populations at risk (e.g., women, children, youth, minorities, men who have sex with men, substance abusers, people with disabilities and the elderly) appropriate to their activities</p>	<ul style="list-style-type: none"> <li>Training, including annual updates about basic medical symptoms and treatment of specific HIV/AIDS manifestations, needs of women and children, and specific HIV/AIDS-related mental health and illness (including HIV/AIDS-related dementia), is documented</li> <li>Mechanism exists for making available current information on HIV/AIDS and its treatment to staff</li> </ul>	<p>CCSR  CCSR</p>
	<p>D. Agency provides continuing education for all providers, volunteers, and peers that are appropriate to their activities, including risk and harm reduction.</p>	<ul style="list-style-type: none"> <li>Job descriptions indicate the type of continuing education needed to maintain staff member knowledge and skills, based on job functions</li> <li>Documentation indicates that continuing education occurs on-site or through participation in outside educational programs and that this adheres to job description criteria</li> </ul>	<p>CCSR  CCSR</p>
	<p>E. Staff meet minimum criteria of qualification for their prescribed job functions</p>	<ul style="list-style-type: none"> <li>Job descriptions indicate they type of training or credentials necessary to do the job (includes degrees, licensure or experience)</li> <li>Documentation indicates that each staff person meets minimum qualification (job description, personnel files, agency records)</li> </ul>	<p>CCSR  CCSR</p>





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6. Client rights and confidentiality	<p>A. Clients are informed of their rights and responsibilities and the agency's grievance procedures and this is appropriately documented.</p> <p>B. Written policies regarding confidentiality are part of a Policies and Procedures Manual, are distributed to clients, and are posted in a visible location in program setting. The Manual shall also address staff and volunteer training on HIPAA privacy and security measures</p> <p>C. Agency has written confidentiality policy that includes criteria for how information regarding clients is communicated with other providers (including, when appropriate, the use of client / patient coding instead of names) and is consistent with the protection of client information and sharing information only on a need to know basis</p>	<ul style="list-style-type: none"> <li>Chart reviews indicate compliance</li> <li>Grievance procedures are posted</li> <li>Each agency has appointed a grievance officer as requires</li> <li>Discussion about confidentiality is included in new staff orientation and new client orientation for peer programs and is documented in personnel records and client charts</li> <li>Policies about confidentiality are reviewed by staff with client, signed by both parties, and filed</li> <li>Personal records contained signed confidentiality statement</li> <li>Steps are taken to save patient privacy and confidentiality</li> </ul>	<p>CR FT CCSR</p> <p>CCSR, CR</p> <p>CCSR, CR</p> <p>CCSR FT</p>
	<p>D. Staff and clients review agreements upholding client confidentiality, including methods of client chart access and / or release of information (updated on a yearly basis with current clients), and this is all documented in client files</p>	<ul style="list-style-type: none"> <li>Logs and agenda: Staff training.</li> <li>Review of Policies and Procedures indicates compliance</li> <li>Charts contain HIPAA compliance release of information</li> <li>Linkage/referral agreement addresses HIPAA confidentiality and release of information</li> </ul>	<p>CCSR CCSR CR CCSR</p>
	<p>E. When agency personnel (managers, staff, volunteers, contractors) are terminated all means of agency</p>	<ul style="list-style-type: none"> <li>Consumer service access interview indicates compliance.</li> <li>Client receipt of confidentiality agreement is documented in client chart</li> <li>Staff and clients review agreements upholding client confidentiality, including methods of client chart access and /or release of information (updated on a yearly basis with current clients), and is documented in client files</li> <li>Staff training logs indicate Staff and volunteers are trained on the confidentiality policies and procedures of the agency and such training will also address HIPAA privacy and security measures</li> </ul>	<p>MI, CP CR CR</p> <p>CCSR</p>
		<ul style="list-style-type: none"> <li>Review of employee records indicates compliance</li> <li>Review of policies and procedures</li> </ul>	<p>CCSR CCSR</p>

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7. Safe, secure environment.	<p>access (access cards, codes, keys, official identification) are confiscated and /or systemic changes are made to assure the integrity of client confidentiality (as outlined above) and uphold client rights</p> <p><b>A.</b> Client service / patient care areas are clean and free of clutter, hazardous substances, or other obstacles that could cause harm</p> <p><b>B.</b> Infection control procedures, including universal precautions, are in place and followed</p> <p><b>C.</b> The agency's physical plant is well secured, including, but not limited to, staff identification, required access devices (keys, access cards, access codes, etc.), and appropriate limitation on access to restricted areas of the agency</p> <p><b>D.</b> Illicit drugs, alcohol and weapons are prohibited on the agency's premises.</p>	<ul style="list-style-type: none"> <li>Facility tour indicates compliance</li> <li>Policies and Procedures Manual describes infection control and universal precautions.</li> <li>Staff training on infection control and universal precautions is verified by training records.</li> <li>Verification that the rooms are properly equipped</li> <li>Observation.</li> <li>Policies and Procedures Manual documents protocols safety (hazardous materials, individuals who pose danger, security etc)</li> <li>Staff Interviews</li> </ul>	<p>FT</p> <p>CCSR</p> <p>CCSR</p> <p>FT</p> <p>FT</p> <p>CCSR</p> <p>CCSR</p>
8. Providers offer a comprehensive client centered services on-site, or by referral	<p><b>A.</b> People with an inclusive range of needs are accommodated through services available to all persons living with HIV/AIDS, regardless of physical and mental health severity ensuring that none are excluded due to level of need</p> <p><b>B.</b> Services need to be client driven through client and/or family participation</p>	<ul style="list-style-type: none"> <li>Agency's Policies and Procedures Manual indicates compliance</li> <li>Observation of signage, security procedures</li> <li>Statement(s) in Policies and Procedures Manual ensure provision of services to all persons living with HIV/AIDS for services designated in agency programs</li> <li>Policies and Procedures Manual contains written procedures for referral and follow-up for clients for whom agency services are inappropriate</li> <li>Referral listing is easily available to staff, including listings of services for clients whose needs staff are unable to provide for themselves</li> <li>Documentation and observation that clients are given clear information about treatment options</li> <li>There is documentation in client charts that clients participate in decision making to the best of their ability as indicated by notation of client choices or preferences or the provider effort to elicit these</li> <li>Client satisfaction survey results indicate clients feel that they have an opportunity to make choices in planning their care and service plans</li> </ul>	<p>CCSR</p> <p>FT</p> <p>CCSR , CP</p> <p>CCSR</p> <p>FT, CCSR</p> <p>CR, CP</p> <p>CR</p> <p>CCSR</p>

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