

New Haven Ryan White Part A HIV Chart Review: Administrative

1	PROGRAM SITE:		CHART #s:	
2	REVIEWER(S):		REVIEW DATE:	

EMPLOYEE CRITERIA		1	2	3	4	5	6	7	8	9	10
3	Licensures and certifications are on file with agency &/or on display on premises										
PROFESSIONAL DEVELOPMENT											
4	System in place for min. biweekly supervision of program staff or weekly for clinics										
5	Annual training for cultural competency includes ethnicity, sexual orientation, religious beliefs & gay culture										
	Information on grievance procedures										
RESPONSIBILITIES & TOOLS											
6	Complaints Documented complaints regarding insensitivity of providers _____ Documented steps to rectify complaints _____ Grievances filed _____	___	___	___	___	___	___	___	___	___	___
	Documentation of HIV sensitivity training provided to sub-contractors										
	Subcontractors: Sensitivity Training Documentation of HIV sensitivity training provided to subcontractors										
7	Staff Support Staff support, employee assistance program to assist in burnout, stress & grief										
8	Policies & Procedures Manual A comprehensive agency policy and procedure manual which includes: <u>Annual review of policies and procedures</u> _____ <u>After hours coverage</u> _____ <u>Building emergencies</u> _____ <u>Client bill of rights & anti-discrimination policy</u> _____ <u>Client confidentiality & cultural competency</u> _____ <u>Client grievance procedures</u> _____ <u>Continuous quality improvement</u> _____ <u>Documentation requirements</u> _____ <u>Exchange of information between agencies & providers</u> _____ <u>Incidents reports</u> _____ <u>Infection control/universal precautions</u> _____ <u>Medical emergencies</u> _____ <u>Safety protocols for clients & employees</u> _____ <u>Sexual harassment</u> _____ <u>Smoking</u> _____ <u>Staff orientation</u> _____ <u>Staff continuing education & training requirements</u> _____ <u>Suspected child abuse</u> _____ A Process is in place to allow for modification of services if needed	___	___	___	___	___	___	___	___	___	___
SERVICES											
10	Staff receive cultural competency orientation and training										
	Important documents & service information available in dominant client languages										
	Process & resources in place for all clients with disabilities										
	Cultural/lingual staff for dominant client cultures/languages; provides translation										
	Ratio of staff to clients by race/ethnicity										
	Cultural competency training includes										
	There is tracking of service denial due to language or cultural barriers										

CONFIDENTIALITY		1	2	3	4	5	6	7	8	9	10
12	Staff files have applicable, signed confidentiality agreements										
	Staff files have confidentiality & HIPAA requirements orientation & annual training										
	Client paper files secure in locked cabinet & locked office										
	Electronic client files are password protected										
CONTINUOUS QUALITY IMPROVEMENT											
14	CQI mechanisms in place for incorporating client, staff & service providers feedback										
	Documented changes made to improve services as a result of feed back from clients, staff and service providers										
AGENCY		1	2	3	4	5	6	7	8	9	10
15	Facility is handicap accessible & clean, well ventilated with adequate heat, restrooms, private space, & comfort features										
16	Facility passed fire & safety inspections with necessary security system in place										
	CQI										
	Program has established indicators for quality assurance of services	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____
	There is a quality assurance committee that meets monthly	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____
	Quality assurance meetings and outcomes are documented	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____

Y = Yes N = No NA=Not Applicable (to program/facility)

1	PROGRAM SITE:		REVIEW DATE:	
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