



INLAND
EMPIRE
HIV
PLANNING
COUNCIL

San Bernardino County
Department of Public Health
351 N. Mt. View • San Bernardino, CA 92415-0475
(909) 693-0750
Website: www.iehpc.org

Riverside/San Bernardino California Transitional Grant Area

Cameron Kaiser, MD
County Health Officer Co-Chair

Shelia Cromwell-Nieve
Community Co-Chair

Standards Committee

Thursday, September 22, 2016
11:00am-12:30pm

Meeting Location

Department of Public Health
351 North Mt. View Ave., B15
San Bernardino, CA 92415
(909)693-0750

Teleconferencing Location***

Desert AIDS Project
1695 North Sunrise Way
Palm Springs, CA 92262
(760) 323-2118

Agenda

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|----------------|---|-----------------------|
| 11:00am | 1. Call to Order | L. White |
| | <ul style="list-style-type: none"> ▪ Roll Call* ▪ Introductions | |
| | 2. Public Comments¹ | Members of the Public |
| | 3. Members Privilege | PC Members |
| | 4. Approval of Agenda² | L. White |
| | Motion to approve 6.9.16 agenda. | |
| | 5. Approval of the Minutes² | L. White |
| | Motion to approve May 19, 2016 minutes | |
| | 6. Old Business² | L. White |
| | 6.1 Review Common Standards | |
| | 6.2 Review Transportation Standard (A-1) | |
| | 7. New Business | L. White |
| | 7.1 Review Criteria & Eligibility for Psychosocial Standard (A-2) | |

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| 8. Public Comment¹ | Members of the Public |
| 9. Members Privilege | PC Members |
| 10. Review of Action Items | PC Staff |
| 11. Agenda Setting for Next Meeting January 12, 2017 HIV Planning Council Conference Room | L. White |
| 12. Roll Call* | PC Staff |
| 12:30pm 13. Adjournment | L. White |

¹ Public Comments: Any member of the public may address this meeting on items of interest that relate to the Ryan White CARE Act by completing a speaker slip to indicate their interest in addressing the Planning Council. A three-minute limitation will normally apply to each member of the public who wishes to comment, unless waived by the Chair.

² The agenda item may consist of a discussion and a vote. Public comments can be made prior to each Planning Council vote.

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**INLAND EMPIRE HIV PLANNING COUNCIL STANDARDS OF CARE
RIVERSIDE / SAN BERNARDINO TRANSITIONAL GRANT AREA
RYAN WHITE HIV/AIDS PROGRAM**

MEDICAL TRANSPORTATION SERVICES

This document offers a limited set of focused standards addressing key aspects specific to this service category. Other relevant standards, including the Common Standards, as well as other policies, recommendations and guidelines should be referenced in conjunction with this standard.

Purpose of Standards

These service and care standards are prescribed by the Inland Empire HIV Planning Council (IEHPC). The purpose of these standards is to establish a minimum set of quality expectations to ensure uniformity of service funded by the Health Resources and Services Administration (HRSA) under the Ryan White HIV/AIDS Program legislation across the Riverside/San Bernardino Transitional Grant Area (R/SB TGA).

These standards are to be monitored and enforced by means of incorporation into service provision contracts managed by the Ryan White Program (RWP) Office on behalf of the IEHPC, as provided by the Ryan White HIV/AIDS Program legislation and HRSA policies, guidance, and other requirements.

Definition of Services (HRSA)

***Medical Transportation Services** include conveyance services provided, directly or through voucher, to a client so that he or she may access health care services.*

I. Care and Treatment Goal(s)

To enable access to health care or support services as deemed necessary by clinician and/or medical case manager to maintain/improve health outcomes.

II. Service Goal

To provide transportation services to necessary health care or support services for eligible individuals that also take into account the traveler's health-care needs. Transportation services may be provided routinely or on an emergency basis.

A. Service Objectives

1. To provide various modes of transportation to health care or support service appointments.
2. To provide a service that is safe, of high quality, and prompt.
3. To provide cost-effective transportation to health care or support service appointments.

B. Description of Services

Service Components

1. When appropriate, service provision plans must be made available for development of the client's Care Plan.
2. If a Care Plan is in place the Care Plan should be reviewed and incorporated into the delivery of Medical Transportation. If a client receiving Medical Transportation presents with additional service needs, these needs should be incorporated into the clients Care Plan, if they are ever in need of Medical Case management.
3. Provide the most economical means of transportation whenever possible.
4. Allowable modes of transportation service include:
 - a) Bus passes
 - b) Gasoline vouchers
 - c) Van trip
 - d) Urgent taxi trip (only when no other option is available)
5. Documentation must be maintained for all modes to verify that transportation funds were received by the client and were used to access necessary health care and support service appointments. For instance, the provision of gasoline vouchers requires a log with client signature and date indicating that the client received the gasoline voucher as well as a consumer travel record showing dates, location of service appointments and mileage. Travel records must be signed by a staff member at the destination-agency (medical or support service staff) to verify that the individual made it to the intended appointment.
6. No-cost, non-profit or volunteer transportation services should be used as often as possible. Agency representatives must identify such resources with clients prior to provision of other options.
7. Taxi services may be used, but should be considered last resort.

C. Limitations

1. Funds may not be used for client automobile maintenance or repairs or for tires.
2. Funds may not be used for ambulance service.
3. Funds may not be used to transport individuals outside the TGA except when needed services are unavailable within the TGA. Trips outside the TGA must be recommended by a physician, clinician, and a medical case manager, and authorized by the Ryan White Program Staff.
4. Funds may not be used to assist with participation in clinical trials.
5. Funds may not be used to transport individuals to Inland Empire HIV Planning Council meetings or other meetings not directly associated with maintaining/improving the individual's health care.

III. Service-Specific Staff Qualifications

If staff is used to provide van transport, they must have a California Driver's License and the minimum required amount of Automobile Insurance as required by the law to transport

clients. *Please refer to the Common Standards of Care for additional general staff qualification requirements.*

IV. Exceptions and Urgent Need

Please refer to the Common Standards of Care for guidance concerning exceptions and Urgent Need.

V. Reportable Units of Service and Financial Eligibility

Please refer to the current service contract for a description of the unit of service and financial eligibility thresholds for each service category.

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| HIV PSYCHOSOCIAL SUPPORT SERVICES |
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**INLAND EMPIRE HIV PLANNING COUNCIL STANDARDS OF CARE
RIVERSIDE / SAN BERNARDINO TRANSITIONAL GRANT AREA
RYAN WHITE HIV/AIDS PROGRAM**

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Purpose of Standards

These service and care standards are prescribed by the Inland Empire HIV Planning Council (IEHPC). The purpose of these standards is to establish a minimum set of quality expectations to ensure uniformity of service funded by the Health Resources and Services Administration (HRSA) under the Ryan White HIV/AIDS Program legislation across the Riverside/San Bernardino Transitional Grant Area (R/SB TGA).

These standards are to be monitored and enforced by means of incorporation into service provision contracts managed by the Ryan White Program (RWP) Office on behalf of the IEHPC, as provided by the Ryan White HIV/AIDS Program legislation and HRSA policies, guidance, and other requirements.

Definition of Service (HRSA)

***Psychosocial support services** are the provision of support and counseling activities, child abuse and neglect counseling, HIV support groups, pastoral care, caregiver support, and bereavement counseling. Includes nutrition counseling provided by a non-registered dietitian but excludes the provision of nutritional supplements.*

I. Care and Treatment Goal(s)

To provide support and counseling regarding the emotional and psychological issues related to living with HIV to those affected directly and indirectly by HIV and to promote problem solving, service access, steps towards disease self-management and positive health outcomes.

II. Service Goal:

To provide services that alleviate and remove psychosocial barriers to participation in the care system and achievement of positive healthcomes in the HIV continuum of care.

A. Service Objectives:

1. To provide psychosocial support services through the delivery of individual and group counseling to persons living with HIV/AIDS, in the TGA. To promote linkage to and retention in the HIV continuum of care, as well as to provide support to those otherwise affected by HIV/AIDS.

B. Description of Services

Service Components

1. Develop initial individual assessment.
2. When appropriate, this initial assessment must be made available for development of the client's Care Plan.
3. If a Care Plan is in place, the Care Plan should be reviewed and incorporated into the delivery of Psychosocial Support. If a client receiving HIV Psychosocial Support presents with additional service needs, these needs should be incorporated into the clients Care Plan, if they are ever in need of HIV Medical Case Management.
4. Provide individual counseling session(s). Document service provision, goals, and progress.
5. Provide group counseling sessions(s). Document group service provision such as: topics/focus, participant names and HIV status, group duration, group type (open/closed), general group goals.
6. Provide allowable, needed services to family members and significant others in the client's support system, with the goal of developing and strengthening the client's support system to help maintain their connection to medical care.
7. Facilitate successful case conferencing sessions through direct participation and the provision of appropriate information, as applicable
8. Coordinate and make both interagency and outside referrals as appropriate..

C. Limitations

1. Excludes the provision of nutritional supplements.

III. Service-Specific Staff Qualifications

There are no prescribed staff qualifications specific to HIV Psychosocial Support Services. *Please refer to the Common Standards of Care for general staff qualification requirements.*

IV. Exceptions and Urgent Need

Please refer to the Common Standards of Care for guidance concerning exceptions and Urgent Need.

V. Reportable Units of Service and Financial Eligibility

Please refer to the current service contract for a description of the unit of service and financial eligibility thresholds for each service category.



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Riverside/San Bernardino California Transitional Grant Area

Cameron Kaiser, MD
County Health Officer Co-Chair

Shelia Cromwell-Nieve
Community Co-Chair

Standards Committee

Thursday, June 9, 2016
11:00am-12:30pm

Meeting Location

Department of Public Health
351 North Mt. View Ave., B15
San Bernardino, CA 92415
(909)693-0750

Teleconferencing Location***

Desert AIDS Project
1695 North Sunrise Way
Palm Springs, CA 92262
(760) 323-2118

Minutes

Members: D. Huntsman, L. White, Z. Welden, C. Smith, A. Jacobson

Staff: A. Fox

RWP Staff: B. Flippin

Guests: K. Tollison, M. Aitchison, N. Sheffield, V. Perez

11:43am

1. Call to Order

- Roll Call*
- Introductions

L. White

2. Public Comments¹

NONE

Members of the Public

3. Members Privilege

NONE

PC Members

4. Approval of Agenda²

Motion to approve 6.9.16 agenda.

Motion to approve the 6.9.16 agenda as revised.

M/S/C: D. Huntsman, C Smith – No Abstentions

L. White

5. Approval of the Minutes²

Motion to approve May 19, 2016 minutes

Motion to approve the 5.19.16 minutes.

M/S/C: C. Smith, D. Huntsman – No Abstentions

L. White

6. Old Business²

6.1 Review Common Standards (A-1)

Review Partner Services Language

Committee members reviewed and discussed Partners Services criteria in the Common Standards. Committee determined that getting an annual written acknowledgement from consumers was problematic when attempting data input. The committee determined that annual notification of the availability of Partner Services could be re-worded.

L. White

There was a motion to remove signature request of the Partner Services in section 5 in the Common Standards and modifying the Consent and Notification section by adding a section "(d) being informed annually of availability of partner services." M/S/C: C. Smith, D. Huntsman – No Abstentions

7. New Business

7.1 Review Criteria & Eligibility for Psychosocial Standard (A-2) **Tabled for next meeting**

7.2 Review Oral Health Standard (A-3)

The committee reviewed and discussed the Oral Health Standard. The committee discussed the limitation of the 199% of Federal Poverty Level (FPL) criteria for eligibility for services. The committee discussed the impact of changing percentage of FPLs. The committee agreed on changing the FPL to 200%-400%. The change would allow up to 370 consumers to receive services. There was a motion to change the Federal Poverty Level criteria to 200%-400% for Oral Health. M/S/C: C. Smith, D. Huntsman - Z. Welden Abstained

L. White

8. Public Comment¹

NONE

Members of the Public

9. Members Privilege

NONE

PC Members

10. Review of Action Items

Staff will:

PC Staff

1. Make revisions in the Common Standards regarding
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- Partner Services
 - 2. Make revisions in the Oral Health Standards
 - 3. Agendize committee recommendations on Common Standards and Oral Health Standards on June 23, 2016 Council Agenda
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11. Agenda Setting for Next Meeting

September 22, 2016

L. White

Review Psychosocial Standard

HIV Planning Council Conference Room

12. Roll Call*

PC Staff

12:35pm

13. Adjournment

L. White

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