

HIV PREVENTION STANDARDS OF CARE



**Utah Department of Health
Bureau of Communicable Disease Control
HIV Prevention Program**

October 2005

**For more information or technical assistance in developing or meeting any of these guidelines, please contact:
Utah Department of Health
Bureau of Communicable Disease Control
HIV Prevention Program
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**These standards can also be found online at:
<http://www.health.state.ut.us/els/hiv aids>**

TABLE OF CONTENTS

Definitions.....4

Intervention Standards.....6

Counseling and Testing Standards.....9

Training and Administration Standards.....14

Definitions

The definitions of commonly used terms are listed below:

Alternative Test Site:

A location where HIV testing is conducted outside of the traditional clinical setting.

Appropriate Grantee Staff:

Paid or volunteer staff trained to implement a particular intervention/service to clients.

Confidentiality:

Ensuring that personal information is maintained between individuals (staff, volunteers and/or clients).

Conventional Testing:

Non-rapid HIV testing. Usually conducted by collecting a blood or oral tissue sample, which is then sent to a laboratory for processing. Test results are available for the client/patient in approximately two weeks.

Counselor:

A person trained to provide HIV counseling, testing and referral services.

DEBI:

Diffusion of Effective Behavioral Interventions. DEBI interventions are based on scientifically sound principles (see “Scientifically-Proven/Evidenced Based” below) with documented outcomes. DEBI interventions must be delivered with a minimum of customization to retain the value of the intervention and outcome.

Documentation:

The source of the data used to assess indicators, which may include but is not limited to: written and/or oral surveys, pre- and post-test knowledge assessments, and research studies.

Grantee:

A person or organization funded by the HIV Prevention Program of the Utah Department of Health.

Group Level Intervention:

Multi-session intervention with more than one person involved.

HPP

Acronym for Utah Department of Health, HIV Prevention Program

Indicator:

Observable and measurable data that track a program’s progress and success in achieving results.

Individual Level Intervention:

Single or multi-session intervention involving one-on-one interaction between a provider and a client.

Outcome:

A result that may occur during or after program participation.

Outreach:

An intervention that involves HIV prevention workers entering the spaces and communities inhabited or frequented by a target population to deliver a particular set of messages and/or services.

Outreach Contact:

When an outreach worker interacts with an individual during an outreach intervention.

Prevention Case Management:

On-going, in-depth risk reduction education that addresses individual needs of clients that targets either HIV positive or high-risk HIV negative persons.

Quality Assurance:

Oversight to ensure grantees follow all published and recommended guidelines for services.

Rapid HIV Testing:

HIV testing where results are available to the client the same day the test is performed.

Scientifically-Proven/Evidence-Based:

An intervention whose process and protocol has been proven, through scientific study (not anecdotal evidence), to be effective when implemented within a particular community.

Secure File Storage:

Storing confidential counseling and testing files in a locked file cabinet.

Standard of Care:

A benchmark that is accepted by recognized authorities and widely used.

STD/I:

Sexually Transmitted Disease/Infection.

INTERVENTIONS

Definition:

An intervention is a specific activity (or set of related activities) intended to change the knowledge, attitudes, beliefs, behaviors or practices of individuals and populations, to reduce their health risk. An intervention has a distinct process, outcome, objectives and a protocol outlining the steps for implementation.

Successful interventions are those that have been evaluated and have been proven to be effective through research studies and have shown positive behavioral (e.g. use of condoms, reduction in number of partners) and/or health outcomes (e.g. reduction in the number of new HIV infections).

OUTCOME 1: The Utah Department of Health will fund effective interventions.

Standard 1

| STANDARD | INDICATOR | DOCUMENTATION |
|---|---|-------------------------------|
| Evaluation plans are submitted before interventions are funded. | <ul style="list-style-type: none"> • Grantee(s) must submit an evaluation plan describing the specific measures and activities planned to evaluate the effectiveness of the intervention(s). • The evaluation plan must be submitted before the intervention is funded. | Grantee: ' Evaluation plan |

Standard 2

| STANDARD | INDICATOR | DOCUMENTATION |
|---|---|---|
| Interventions are evidence-based or scientifically proven to be effective in the target population. | <ul style="list-style-type: none"> • Current data shows that the intervention is effective in the target population OR the intervention has been scientifically proven to be effective in similar populations. | Grantee: ' Evaluation plan ' Evaluation results |

Standard 3

| STANDARD | INDICATOR | DOCUMENTATION |
|---|--|--|
| Interventions are targeted to reach persons at increased risk for contacting or transmitting HIV. | <ul style="list-style-type: none"> • Interventions are designed to target priority populations as defined by the Community Planning Committee (CPC). • Interventions are designed to be culturally and linguistically appropriate. | Grantee: ' Grant Agreement UDOH: ' Annual Grant Application ' CPC Priority Setting Results |

Standard 4

| STANDARD | INDICATOR | DOCUMENTATION |
|---|--|---------------------------------------|
| Group Level Interventions (GLI) are implemented according to UDOH GLI guidelines. | <ul style="list-style-type: none"> • GLI involves a qualified facilitator and two or more individuals. • The appropriate number of sessions and hours must be based on evidence or CDC guidelines, pertaining to each particular intervention. | Grantee: ' Online Reporting System |

Standard 5

| STANDARD | INDICATOR | DOCUMENTATION |
|--|---|---------------------------------------|
| Individual Level Interventions (ILI) are implemented according to UDOH ILI guidelines. | <ul style="list-style-type: none"> • ILI involves one-on-one interaction between a qualified provider and a client. • The appropriate number of sessions and hours must be based on evidence or CDC guidelines, pertaining to each particular intervention. | Grantee: ' Online Reporting System |

Standard 6

| STANDARD | INDICATOR | DOCUMENTATION |
|---|---|---------------------------------------|
| Outreach is implemented according to UDOH guidelines. | <ul style="list-style-type: none"> • Outreach involves contact between a trained outreach worker and one or more members of a target population within their indigenous community. • Workers provide appropriate referrals to community agencies. | Grantee: ' Online Reporting System |

Standard 7

| STANDARD | INDICATOR | DOCUMENTATION |
|---|--|--|
| Health Communication/Public Information (HC/PI) interventions are implemented according to UDOH guidelines. | <ul style="list-style-type: none"> • Health Communication is a one-time educational event intended to increase awareness of HIV/AIDS. • Public Information (PI) involves the distribution of HIV/AIDS information using various media outlets. • PI is approved by the program review panel. • PI must be authorized by the UDOH Public Information Officer. | Grantee: ' Online Reporting System UDOH: ' Program Review Panel Approval Form ' Public Information Proof Approval Form |

Standard 8

| STANDARD | INDICATOR | DOCUMENTATION |
|---|---|--|
| Prevention Case Management (PCM) is implemented according to UDOH guidelines. | <ul style="list-style-type: none"> • PCM involves one-on-one intensive interaction between a credentialed provider and a high-risk or positive client. • PCM is provided according to the CDC document, "HIV Prevention Case Management: Guidance". | Grantee: ' Online Reporting System UDOH: ' Site Audit Questionnaire |

OUTCOME 2: Interventions will comply with Utah Department of Health requirements.

Standard 1

| STANDARD | INDICATOR | DOCUMENTATION |
|--|--|---|
| All distributed materials funded by UDOH are created according to UDOH guidelines. | <ul style="list-style-type: none"> • All print and media materials funded by UDOH must receive UDOH program review panel approval. • All approved materials must be authorized by the UDOH Public Information Officer. | UDOH: ' Program Review Panel Approval Form ' Public Information Proof Approval Form |

Standard 2

| STANDARD | INDICATOR | DOCUMENTATION |
|--|---|---|
| Interventions are implemented by appropriately credentialed providers. | <ul style="list-style-type: none"> • Providers must have appropriate training and/or credentials to implement all specified interventions. | UDOH: ' Site Audit Questionnaire Grantee: ' Annual Grant Application |

COUNSELING AND TESTING

Definition:

An individualized intervention based on CDC’s Counseling & Testing Guidelines aimed at learning current serostatus; increasing understanding of HIV infection; assessing risk of HIV acquisition and transmission; negotiating behavior change to reduce risk of acquiring or transmitting HIV; and providing referrals for additional medical, preventive and psychosocial needs.

OUTCOME 1: Counseling and testing sites will comply with Utah Department of Health requirements.

Standard 1

| STANDARD | INDICATOR | DOCUMENTATION |
|---|---|--|
| All grantees providing counseling and testing meet UDOH site standards. | <ul style="list-style-type: none"> • Grantee must establish a permanent location for secure client file storage. • Grantee must create and maintain an individual client file system, based on UDOH standards. • Grantee must obtain unique site number from UDOH. | UDOH: / Rapid Testing Site Audit Form / Unique Site Number |

Standard 2

| STANDARD | INDICATOR | DOCUMENTATION |
|--|---|--|
| All grantees providing counseling and testing meet UDOH client file standards. | Client File will include: <ul style="list-style-type: none"> • Intake Form • Informed Consent • Copy of Data Collection Form • Progress Notes • Lab Sheet/Test Result Form • Consistent Labeling System • For positive results only-copy of interview record | Grantee: / Client File UDOH: / Interview Record |

Standard 3

| STANDARD | INDICATOR | DOCUMENTATION |
|--|---|---|
| All grantees providing counseling and testing meet UDOH reporting standards. | <ul style="list-style-type: none"> • Grantee must submit required data to UDOH within 30 days of post-test counseling session. • Data collection form or online reporting system must be filled out completely and correctly. • Use unique site number to report data. | Grantee: / Data Collection Form or Online Reporting System |

Standard 4

| STANDARD | INDICATOR | DOCUMENTATION |
|--|--|--|
| <p>Clients receive counseling and testing services from appropriately trained providers.</p> | <ul style="list-style-type: none"> • Counselors have current certification for providing counseling and testing services in Utah. • Grantee ensures appropriately credentialed staff deliver services. | <p>Grantee: / Counselor Identification Card</p> <p>UDOH: / Documentation of staff attending updates or in-services by UDOH</p> |

Standard 5

| STANDARD | INDICATOR | DOCUMENTATION |
|--|--|--|
| <p>Grantees follow all guidelines for rapid testing.</p> | <ul style="list-style-type: none"> • Grantees have current certifications for rapid testing. • Grantees follow published guidelines for rapid testing. | <p>Grantee: / Counselor Identification Card</p> <p>UDOH: / Rapid Testing Procedures Manual</p> |

Standard 6

| STANDARD | INDICATOR | DOCUMENTATION |
|---|--|--|
| <p>Fundamentals Counselors meet UDOH counseling certification requirements.</p> | <ul style="list-style-type: none"> • Counselors must successfully complete “Fundamentals of HIV Prevention Counseling”. • Each calendar year, counselors must conduct at least 12 counseling sessions, or attend an update class, to maintain certification. | <p>Grantee: / Counselor Identification Card</p> |

Standard 7

| STANDARD | INDICATOR | DOCUMENTATION |
|---|--|---|
| <p>PCRS Counselors meet UDOH counseling certification requirements.</p> | <ul style="list-style-type: none"> • Counselors must conduct 6 pre-test counseling sessions prior to attending “HIV Prevention Counseling: Issues for Clients Who Test Positive”. • Counselors certified to give positive results must complete an annual UDOH update. | <p>Grantee: / Counselor Identification Card</p> <p>UDOH: / Attendance Log</p> |

Standard 8

| STANDARD | INDICATOR | DOCUMENTATION |
|-----------------------------------|---|---|
| <p>UDOH conducts site visits.</p> | <ul style="list-style-type: none"> • UDOH HPP contract manager will conduct a minimum of 2 visits each year. • Site visits may include an audit of counseling files, site inspection, direct observation, interview, counseling updates and technical assistance. | <p>UDOH: / Site Visit Report</p> |

OUTCOME 2: All counseling providers will comply with professional and UDOH standards of practice.

Standard 1

| STANDARD | INDICATOR | DOCUMENTATION |
|--|---|---|
| Grantees comply with state and federal confidentiality statutes. | <ul style="list-style-type: none"> • A written policy statement regarding client confidentiality is signed by each employee or volunteer, and is maintained by agency. • Services are provided and client files are maintained in accordance with the confidentiality statutes. | Grantee: ' Confidentiality agreement |

Standard 2

| STANDARD | INDICATOR | DOCUMENTATION |
|---|---|---------------------------|
| Grantees adhere to all intake guidelines. | <ul style="list-style-type: none"> • Informed consent signed by each client tested. • Accurate and adequate contact information obtained for each client tested. • Each client receives a unique identifier. | Grantee: ' Client File |

Standard 3

| STANDARD | INDICATOR | DOCUMENTATION |
|---|---|------------------------------|
| Pre-test counseling is delivered according to UDOH recommendations. | <ul style="list-style-type: none"> • Counseling services follow the Fundamentals of HIV Prevention Counseling including a discussion of window period, risk reduction, methods of transmission and last exposure. • For rapid testing, prepare client for same-day results. | Grantee: ' Progress Notes |

Standard 4

| STANDARD | INDICATOR | DOCUMENTATION |
|--|---|------------------------------|
| Post-Test Negative/Non-Reactive results are delivered according to UDOH recommendations. | <ul style="list-style-type: none"> • Counseling services follow the Fundamentals of HIV Prevention Counseling including a discussion of window period, risk reduction, referrals and follow-up. • Discuss retest recommendations, if appropriate. | Grantee: ' Progress Notes |

Standard 5

| STANDARD | INDICATOR | DOCUMENTATION |
|--|---|------------------------------|
| Post-Test Indeterminate results are delivered according to UDOH recommendations. | <ul style="list-style-type: none"> • Define an indeterminate result. • Discuss implication of an indeterminate result, including risk reduction and confounding factors. • Recommend retesting in 30 days. | Grantee: ' Progress Notes |

Standard 6

| STANDARD | INDICATOR | DOCUMENTATION |
|---|---|------------------------------|
| Post-Test Reactive results are delivered according to UDOH recommendations. | <ul style="list-style-type: none"> • Discuss need for confirmatory testing. • Discuss implication of a reactive result, including risk reduction and confounding factors. • Initiate PCRS discussion. • Schedule follow-up appointment. | Grantee: ' Progress Notes |

Standard 7

| STANDARD | INDICATOR | DOCUMENTATION |
|---|---|---|
| Post-Test Positive results are delivered according to UDOH recommendations. | <ul style="list-style-type: none"> • Discuss implication of a positive result, including disclosure, health care, risk reduction, referrals and follow-up. • Interview Record completed for each positive client. • Initiate PCRS. | Grantee: ' Progress Notes UDOH: ' Interview Record |

Standard 8

| STANDARD | INDICATOR | DOCUMENTATION |
|--|---|---|
| Partner Counseling and Referral Services (PCRS) are delivered according to UDOH recommendations. | <ul style="list-style-type: none"> • PCRS is offered to all clients who test positive for HIV. • Interview Record completed for each positive client. • Field Record completed for each contact. | Grantee: ' Progress Notes UDOH: ' Interview Record ' Field Record |

OUTCOME 3: All testing providers will comply with professional and UDOH standards of practice.

Standard 1

| STANDARD | INDICATOR | DOCUMENTATION |
|--|--|-----------------------------|
| Grantees meet all UDOH recommendations for handling blood specimens for HIV testing. | <ul style="list-style-type: none"> • Grantee ensures proper storage and transport of sample to laboratory within 2 days of sample collection. | UDOH: ' Lab Test Results |

Standard 2

| STANDARD | INDICATOR | DOCUMENTATION |
|---|--|-----------------------------|
| Grantees meet all UDOH recommendations for conventional oral specimen collection for HIV testing. | <ul style="list-style-type: none"> • Grantee follows all manufacturers' guidelines for testing devices. • Grantee ensures proper storage and transport of sample to laboratory within 7 days of sample collection. | UDOH: ' Lab Test Results |

Standard 3

| STANDARD | INDICATOR | DOCUMENTATION |
|---|---|--|
| Grantees meet all UDOH recommendations for rapid HIV testing. | <ul style="list-style-type: none">• Specimen collected according to UDOH Rapid Testing Procedures Manual. | UDOH: / Rapid Testing Site Audit Form |

TRAINING AND ADMINISTRATION

Definition:

Training is defined as instructing or teaching to become proficient in a particular area.

Administration is managing the various components of an effective HIV prevention program.

OUTCOME 1: Grantees will comply with Utah Department of Health training requirements.

Standard 1

| STANDARD | INDICATOR | DOCUMENTATION |
|---|--|---|
| Grantees meet minimum UDOH training requirements. | <ul style="list-style-type: none"> • Appropriate grantee staff, as defined by contract manager, will complete American Red Cross (ARC) Basic HIV/AIDS Education and Prevention Instructor Training Course, or ARC Hispanic HIV/AIDS Education and Prevention Instructor Training Course. • Appropriate grantee staff, as defined by contract manager, will complete Fundamentals of HIV Prevention Counseling (English/Spanish). • Appropriate grantee staff, as defined by contract manager, will complete at least one recommended training annually. | Grantee: ' ARC Instructor Certificate ' Counselor Identification Card |

Standard 2

| STANDARD | INDICATOR | DOCUMENTATION |
|--|--|---|
| Grantees conducting rapid HIV testing meet minimum UDOH training requirements. | <ul style="list-style-type: none"> • Appropriate grantee staff, as defined by contract manager, will complete HIV Prevention Counseling: Issues of Clients Who Test Positive, Partner Counseling and Referral Services (PCRS), Rapid HIV Testing (English/Spanish). | Grantee: ' Counselor Identification Card |

Standard 3

| STANDARD | INDICATOR | DOCUMENTATION |
|--|---|--|
| Grantees attend at least one additional recommended training annually. | <p>Appropriate grantee staff, as defined by contract manager, will complete at least one of the following:</p> <ul style="list-style-type: none"> • Bridging the Gap: Medical Interpreter’s Training Course • Outreach Worker Training • Cultural Competency • Hepatitis C Instructor Training • Update Courses • Rapid HIV Testing Trainings • Safer-Sex/Risk Reduction Trainings • STI/TB/Hepatitis | <p>Grantee:</p> <ul style="list-style-type: none"> ’ Counselor Identification Card ’ Completion Certificates |

Standard 4

| STANDARD | INDICATOR | DOCUMENTATION |
|--|--|---|
| Grantees participate in all required special events. | <ul style="list-style-type: none"> • Grantees will participate in special events, as required in the grant agreement. | <p>Grantee:</p> <ul style="list-style-type: none"> ’ Online Reporting System ’ Site Audit Questionnaire |

OUTCOME 2: Administrative tasks will be conducted efficiently.

Standard 1

| STANDARD | INDICATOR | DOCUMENTATION |
|--|---|---|
| Grantees maintain regular contact with UDOH staff. | <ul style="list-style-type: none"> • Grantees will attend all Quarterly Grantee Meetings. • Grantee must maintain telephone and email contact with contract manager, as requested. • Grantee will inform UDOH of all applicable changes within the agency. | <p>UDOH:</p> <ul style="list-style-type: none"> ’ Quarterly Grantee Meeting Attendance Log ’ Site Audit Questionnaire |

Standard 2

| STANDARD | INDICATOR | DOCUMENTATION |
|--|---|---|
| Site Visits are conducted by HPP staff on a quarterly basis. | <ul style="list-style-type: none"> • Grantee will participate and make available all required documentation. | <p>UDOH:</p> <ul style="list-style-type: none"> ’ Site Audit Questionnaire |

Standard 3

| STANDARD | INDICATOR | DOCUMENTATION |
|---|---|---------------------------------------|
| Grantees maintain current, complete and accurate data in the online reporting system. | <ul style="list-style-type: none"> • Information is entered within 30 days of client contact. • All applicable data fields are completed for each client contact. • Narrative analysis is completed for each intervention quarterly. | Grantee: ' Online Reporting System |

Standard 4

| STANDARD | INDICATOR | DOCUMENTATION |
|---|--|---|
| Grantees work in collaboration with appropriate grantees. | <ul style="list-style-type: none"> • Grantees collaborate and coordinate with other grantees, as required in the grant agreement. | Grantee: ' Online Reporting System ' Site Audit Questionnaire |

Standard 5

| STANDARD | INDICATOR | DOCUMENTATION |
|--|--|--------------------------------------|
| Grantees submit expense reports according to UDOH standards. | <ul style="list-style-type: none"> • Monthly expense reports will be mailed (not faxed) by the 15th day of the following month. • Expense reports will contain the following: -Original Signature -Copies of all pertinent receipts -Documentation of Hours Worked -Exceptions to line item budget must be appropriately documented in accordance with grant guidelines. | Grantee: ' Monthly Expense Report |

Standard 6

| STANDARD | INDICATOR | DOCUMENTATION |
|--------------------------------------|---|---|
| Expense Reports meet UDOH standards. | <ul style="list-style-type: none"> • UDOH staff will approve expense reports and submit for payment within five business days from date of receipt. • Incomplete expense reports will be returned to grantee for further clarification. | UDOH: ' Stamped Approval of Monthly Expense Report |

Standard 7

| STANDARD | INDICATOR | DOCUMENTATION |
|--|---|---|
| UDOH staff provide Technical Assistance and Capacity Building to HPP grantees. | <ul style="list-style-type: none"> • UDOH staff will conduct quarterly grantee meetings. • UDOH staff will respond to grantee requests for technical assistance/capacity building, as needed. | UDOH: ' Grantee Meeting Minutes ' Technical Assistance Form/Online Reporting System |

Standard 8

| STANDARD | INDICATOR | DOCUMENTATION |
|---|--|--|
| UDOH staff comply with CDC requirements for Community Planning. | <ul style="list-style-type: none">• The 9 essential elements of community planning are completed each fiscal year. | UDOH: / Annual Progress Report to CDC |