



Norfolk TGA Ryan White Part A MEDICAL NUTRITION THERAPY SERVICE STANDARD

SERVICE CATEGORY DEFINITION

Medical Nutrition Therapy (MNT):

Includes include education/counseling for nutrition needs, development and provision of individual nutritional care plans and provide counseling in health promotion, disease progression and disease prevention as it relates to nutrition.

Other services may include referral for medical nutritional therapy Body Mass Index Assessment (BMI), bioelectrical impedance analysis (BIA) or other appropriate measures of nutritional status; review of lab results to gauge nutritional status; nutritional supplements and food secure assessment. Services may include the provision of nutritional supplements.

MNT is provided by a licensed registered dietitian outside of an outpatient/ambulatory health service (OAHS) visit. The provision of food, nutritional services and nutritional supplements may be provided pursuant to a physician's recommendation and a nutritional plan developed by a licensed, registered dietitian. Nutritional counseling services and nutritional supplements not provided by a licensed, registered dietitian shall be considered a support service. Food, nutritional services, and supplements not provided pursuant to a physician's recommendation and a nutritional plan developed by a licensed, registered dietitian also shall be considered a support service.

CLIENT INTAKE AND ELIGIBILITY

All Subrecipient's are required to have a client intake and eligibility policy on file. It is the responsibility of the Subrecipient to determine and document client eligibility status, as outlined in the Ryan White Part A—Norfolk TGA Eligibility Policy in accordance with HRSA/HAB regulations. Eligibility must be completed at least once every six months.

Eligible clients must:

- ◇ Live in the Norfolk TGA (Chesapeake, Norfolk, Virginia Beach, Portsmouth, Suffolk, Hampton, Newport News, Poquoson, Williamsburg, York County, James City County, Gloucester County, Matthews County, Isle of Wight and Currituck County, North Carolina)
- ◇ Have an HIV/AIDS diagnosis
- ◇ Have a household income that is at or below 300% of the federal poverty level



Norfolk TGA Ryan White Part A MEDICAL NUTRITION THERAPY SERVICE STANDARD

- ◇ Be uninsured or underinsured

Services will be provided to all Ryan White Part A qualified clients without discrimination on the basis of: HIV infection, race, creed, age, sex, gender identity or expression, marital or parental status, sexual orientation, religion, physical or mental handicap, immigrant status, or any other basis prohibited by law.

PERSONNEL QUALIFICATIONS

Staff providing Medical Nutrition Therapy services must have documented in their personnel record(s):

1. At least one (1) year of experience in nutrition assessment, counseling, evaluation, and care plans of people living with HIV/AIDS.
2. All MNT staff shall receive training to enhance their basic knowledge about HIV and AIDS and the continuum of care for people living with HIV/AIDS.
3. Registered/Licensed Dietitians are suggested to maintain membership in the Infectious Diseases Nutrition Dietetic Practice Group of the American Dietetic Association (ADA).
4. Registered/Licensed Dietitians will maintain current professional education (CPE) units/hours, primarily in HIV nutrition and other related medical topics as approved by the Commission of Dietetic Registration.
5. Registered/Licensed Dietitians will meet all standards for Medical Nutrition Therapy (MNT) as described in the ADA standards for MNT.



Norfolk TGA Ryan White Part A MEDICAL NUTRITION THERAPY SERVICE STANDARD

CARE AND QUALITY IMPROVEMENT OUTCOME GOALS

The overall treatment goal of medical nutrition therapy within the Norfolk TGA is to provide high quality treatment and counseling services to address the nutritional needs of individuals living with HIV/AIDS.

Clinical Quality Improvement outcome goals for medical nutrition therapy include:

- ◆ 80% of all medical nutrition therapy clients have a nutrition plan in place.
- ◆ 80% of mental health services clients are linked to medical care as documented by at least one medical visit, viral load or CD4 test reported in the measurement year.

SERVICE STANDARDS, MEASURES, AND GOALS

| Standard | Measure | Goal |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------|
| 1. Services are provided by trained professionals. | Documentation of current Virginia licensure. | 100% |
| 2. Staff providing services have been trained to work within the population. | Documentation that staff have basic knowledge of HIV/AIDS and/or infectious disease and can work with vulnerable subpopulations as documented through staff personnel records. | 75% |
| 3. Client file includes date service was initiated and the planned number and frequency of sessions | Documentation of initiation date and frequency plan evident in client chart. | 75% |
| 4. Client file includes a nutrition plan with recommended services and course of medical nutrition therapy provided with signature of assigned medical nutrition therapist. | Documentation of nutrition plan and professional signatures evident in client chart. | 75% |



Norfolk TGA Ryan White Part A
 MEDICAL NUTRITION THERAPY
 SERVICE STANDARD

| Standard | Measure | Goal |
|------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------|------|
| 5. Nutrition Plan is updated as necessary and signed by RD as least twice per year. | Documentation of nutrition plan updates evident in client chart. | 75% |
| 6. Where food is provided, client file includes physician’s recommendation for services. | Documentation of physician’s recommendation evident in file. | 75% |
| 7. Client is linked to medical care. | Documentation that the client had at least one medical visit, viral load, or CD4 test within the measurement year evident in the client chart. | 75% |
| 8. Client had less than 200 copies/mL at last HIV Viral Load test during the measurement year. | Documentation of viral load test outcomes evident through Norfolk TGA CAREWare Performance Measure. | 75% |



Norfolk TGA Ryan White Part A MEDICAL NUTRITION THERAPY SERVICE STANDARD

CLIENTS RIGHTS AND RESPONSIBILITIES

Subrecipient's providing services are required to have a statement of consumer rights and responsibilities posted and/or accessible to the client. Each Subrecipient will take all necessary actions to ensure that services are provided in accordance with the consumer rights and responsibilities statement and that each consumer understands fully his or her rights and responsibilities.

CLIENT RECORDS, PRIVACY, AND CONFIDENTIALITY

Subrecipient's providing services must comply with the Health Insurance Portability and Accountability Act (HIPAA) provisions and regulations and all federal and state laws concerning confidentiality of consumers Personal Health Information (PHI). Subrecipient's must have a client release of information policy in place and review the release regulations with the client before services are received. A signed copy of the release of information form must be included in the clients record. Information on all clients receiving Ryan White Part A funded services must be entered in the HRSA sponsored, Norfolk Part A managed, CAREWare Database.

CULTURAL AND LINGUISTIC COMPETENCY

Subrecipient's providing services must adhere to the National Standards on Culturally and Linguistically Appropriate Services.

CLIENT GRIEVANCE PROCESS

Each Subrecipient must have a written grievance procedure policy in place which provides for the objective review of client grievances and alleged violations of service standards. Clients will be routinely informed about and assisted in utilizing this procedure and shall not be discriminated against for doing so. A signed copy of the grievance procedure policy form must be included in the clients record.

CASE CLOSURE PROTOCOL

Each Subrecipient providing services should have a case closure protocol on file. The reason for case closure must be properly documented in each client's file. If a client chooses to receive services from another provider the Subrecipient must honor the request from the client.