



## Norfolk TGA Ryan White Part A MENTAL HEALTH SERVICE STANDARD

### SERVICE CATEGORY DEFINITION

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#### **Mental Health Services:**

Mental Health Services are the provision of outpatient psychological and psychiatric screening, assessment, diagnosis, treatment, and counseling services offered to clients living with HIV. Services are based on a treatment plan, conducted in an outpatient group or individual session, and provided by a mental health professional licensed or authorized within the Commonwealth of Virginia to render such services. Such professionals typically include psychiatrists, psychologists, and licensed clinical social workers.

### CLIENT INTAKE AND ELIGIBILITY

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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
- ◇ 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.



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### PERSONNEL QUALIFICATIONS

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Mental Health Services must be provided by trained, licensed, or certified mental health professionals:

1. Individual clinicians shall have documented unconditional licensure/certification in his/her area of practice.
2. Subrecipient's shall employ clinical staff who are knowledgeable and experienced regarding their area of clinical practice as well as in the area of HIV/AIDS clinical practice. All staff without direct experience or licensure (e.g. residents, interns, etc.) shall be supervised by staff who is trained, licensed, or certified as a mental health professional in the Commonwealth of Virginia.
3. Staff participating in the direct provision of services to patients must satisfactorily complete all appropriate CEUs/CMEs based on individual licensure requirements.

### CARE AND QUALITY IMPROVEMENT OUTCOME GOALS

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The overall treatment goal of Mental Health Services is to provide treatment and counseling services to address mental illness, eliminating barriers to treatment and increasing adherence to medical care for eligible individuals living with HIV/AIDS.

Clinical Quality Improvement outcome goals for Mental Health Services are:

- 80% of all mental health client files include documentation of a completed comprehensive treatment and care plan.
- 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
- 90% of clients receiving Outpatient Ambulatory Health Services are virally suppressed as documented by a viral load of less than 200 copies / mL at last test.



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## 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.	100%
3. Clients receiving mental health services have a detailed treatment plan that includes the diagnosis of mental health illness or condition.	Documentation of diagnosis of mental health illness or condition evident in the client chart.	80%
4. Clients receiving mental health services have a detailed treatment plan that includes the treatment modality (group or individual).	Documentation of treatment modality recommendation evident in the client chart.	80%
5. Clients receiving mental health services have a detailed treatment plan that includes the start date for mental health services.	Documentation of start date for mental health services evident in the client chart.	80%
6. Clients receiving mental health services have a detailed treatment plan that includes the recommended number of sessions.	Documentation of recommended number of sessions evident in the client chart	80%
7. Clients receiving mental health services have a detailed treatment plan that includes the date for reassessment.	Documentation of recommended date for reassessment evident in the client chart.	80%
8. Clients receiving mental health services have a detailed treatment plan that includes the projected treatment end date.	Documentation of projected treatment end date evident in the client chart.	80%



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Standard	Measure	Goal
9. Clients receiving mental health services have a detailed treatment plan that includes any recommendations for follow up.	Documentation of recommendations for follow up evident in the client chart.	80%
10. Clients receiving mental health services have a detailed treatment plan that includes the signature for the mental health professional rendering service.	Documentation of signature for mental health professional rendering the service evident in the client chart.	80%
11. Mental health clients are 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.	90%
12. Client had less than 200 copies/mL at last HIV Viral Load test during the measurement year.	Documentation of viral load test outcomes evident in client chart.	90%

## 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.



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### CULTURAL AND LINGUISTIC COMPETENCY

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

### CLIENT GRIEVANCE PROCESS

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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

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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.