

## ATLANTA EMA QUALITY MANAGEMENT STANDARDS AND MEASURES CHILD CARE SERVICES

### Purpose

The purpose of the Ryan White Part A quality management standards and measures is to ensure that a uniformity of service exists in the Atlanta Eligible Metropolitan Area (EMA) such that the consumers of a service receive the same quality of service regardless of where the service is provided. If an agency is unable to meet a particular standard, the agency must document why the standard was unable to be met and explain the steps it is taking to meet that standard.

### Definition

Funding for Child Care Services for the children of HIV-positive clients, provided intermittently, only while the client attends medical or other appointments or Ryan White HIV/AIDS Program- related meetings, groups, or training sessions. Child care services may include recreational and social activities for the child, if provided in a licensed or certified provider setting including drop-in centers in primary care or satellite facilities. Service exclusions include the use of funds for off-premise social/recreational activities or gym membership.

### Application of Standards

These standards apply to all agencies that are funded to provide child care services. If an agency would like to view sample policy and procedures, including ethics contracts, please contact the Grantee's office.

### Standards Development Process

The standards were developed through extensive background research on quality management standards, a review of existing standards from other Ryan White Part A EMAs, meetings of the Child Care Services Outreach Task Force and meetings with the Ryan White Part A Grantee.

### Acknowledgements

Fulton County would like to thank all of the EMAs that shared their standards, as well as the members of the Child Care Services Outreach Task Force who gave generously of their time to provide valuable input to the development of these quality management standards and measures.

I. Policies and Procedures	
Standard	Measure
A. Agency must have policies and procedures in place that address confidentiality (HIPAA), grievance procedures and supervision requirements per federal and state law.	<ul style="list-style-type: none"> <li>• Policy and procedure manual</li> <li>• Grievance procedure posted in visible location</li> </ul>
B. Agency has eligibility requirements for services in written form. This is inclusive of: <ul style="list-style-type: none"> <li>✓ Clients rights and responsibilities</li> <li>✓ Release of information/confidentiality</li> <li>✓ Eligibility for services</li> </ul>	<ul style="list-style-type: none"> <li>• Policy on file</li> </ul>

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<b>I. Policies and Procedures (continued)</b>	
<b>Standard</b>	<b>Measure</b>
C. Agency is licensed and/or accredited by the appropriate city/county/state/federal agency.	<ul style="list-style-type: none"> <li>• Current licensure on file from appropriate city/county/state/federal agency</li> </ul>
D. Agency has written policies and procedures in place that protect the physical safety and well-being of staff and clients. This is inclusive of: <ul style="list-style-type: none"> <li>✓ Physical agency safety               <ul style="list-style-type: none"> <li>• Meets fire safety requirements</li> <li>• Complies with Americans with Disabilities Act (ADA)</li> <li>• Is clean, comfortable and free from hazards</li> <li>• Complies with Occupational Safety and Health Administration (OSHA) infection control practices</li> </ul> </li> <li>✓ Crisis management and psychiatric emergencies               <ul style="list-style-type: none"> <li>• How to assess emergent/urgent vs. routine need</li> <li>• Verbal intervention</li> <li>• Non-violent physical intervention</li> <li>• Emergency medical contact information</li> <li>• Incident reporting</li> <li>• Voluntary and involuntary inpatient admission</li> </ul> </li> <li>✓ Refusal of services</li> <li>✓ Personnel               <ul style="list-style-type: none"> <li>• Roles and responsibilities of staff, including supervision responsibilities and staff/client ratio</li> <li>• Ethics contract on personal boundaries (encompassing physical, emotional, spiritual &amp; financial)</li> </ul> </li> <li>✓ Client/Parent/Guardian Rights and Responsibilities (see Standard IV)</li> </ul>	<ul style="list-style-type: none"> <li>• Policy on file</li> <li>• Program Monitoring</li> </ul>
E. Agency has a formal relationship with a mental health/substance abuse professional for consultation as needed if a mental health/substance abuse professional is not on staff.	<ul style="list-style-type: none"> <li>• Written letter of agreement on file</li> </ul>
F. Agency is contractually required to maintain documentation of the following which shall be made available to the Grantee and HRSA upon request and during Ryan White Part A site visits: <ul style="list-style-type: none"> <li>▪ Documentation that records the frequency, dates, and length of service, and type of medical or other appointment or Ryan White-related meetings, group, or training session that made child care necessary</li> <li>▪ Documentation to ensure that child care is intermittent and is provided only to</li> </ul>	<ul style="list-style-type: none"> <li>• Program monitoring</li> </ul>

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<p>permit the client to keep medical and other appointments or other permitted Ryan White-related activities</p> <ul style="list-style-type: none"> <li>▪ Reason why child care was needed – e.g., client medical or other appointment or participation in a Ryan White-related meeting, group, or training session</li> <li>▪ Document that any recreational and social activities are provided only within a licensed or certified provider setting</li> <li>▪ Where provider is a child care center or program, make available for inspection appropriate and valid licensure or registration as required under applicable State and local laws</li> <li>▪ Appropriate liability release forms obtained that protect the client, provider, and the Ryan White program</li> </ul>	
<b>II. Program Staff</b>	
<b>Standard</b>	<b>Measure</b>
A. Staff is trained and knowledgeable about HIV/AIDS and available resources.	<ul style="list-style-type: none"> <li>• Personnel file</li> </ul>
B. Staff has appropriate skills, relevant experience, cultural and linguistic competency, knowledge about HIV/AIDS and available health and social service related resources.	<ul style="list-style-type: none"> <li>• Staff résumés in personnel files</li> <li>• Training records in personnel file</li> <li>• Client satisfaction survey</li> </ul>
C. Staff has a clear understanding of their job description and responsibilities as well as agency policies and procedures.	<ul style="list-style-type: none"> <li>• Job description on file</li> <li>• Statement on file, signed by staff and supervisor</li> </ul>
<b>III. Access to Services</b>	
A. Agency is accessible to desired target populations. Accessibility includes: <ul style="list-style-type: none"> <li>✓ proximity to community</li> <li>✓ proximity to mass transit</li> <li>✓ proximity to low-income individuals</li> <li>✓ proximity to underinsured or uninsured individuals</li> <li>✓ proximity to individuals living with HIV</li> </ul>	<ul style="list-style-type: none"> <li>• Site visit</li> <li>• Agency client data report consistent with funding requirements</li> </ul>
B. Agency demonstrates the ability to provide culturally and linguistically competent services according to Atlanta EMA standards for desired target population	<ul style="list-style-type: none"> <li>• Personnel and training records</li> <li>• Site visit</li> <li>• Client satisfaction survey</li> <li>• Agency client data report consistent with funding requirements</li> </ul>

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<b>III. Access to Services (continued)</b>	
<b>Standard</b>	<b>Measure</b>
C. Agency demonstrates input from clients in the design and delivery of child care services.	<ul style="list-style-type: none"> <li>• Existence of Consumer Advisory Board (CAB); if agency does not have a CAB, it may ask for client input from the Consumer Caucus or other agencies' CABs</li> <li>• Client satisfaction survey</li> </ul>
D. Agency is compliant with ADA requirements for non-discriminatory policies and practices and for the provision of reasonable accommodations to address communication (i.e. sign language interpreter).	<ul style="list-style-type: none"> <li>• Policy on file</li> </ul>
<b>IV. Service Eligibility Screening</b>	
<b>Standard</b>	<b>Measure</b>
<p>A. Provider determines client eligibility for services. Client eligibility will be reassessed every six months. The process to determine client eligibility must be completed in a time frame so that screening is not delayed. Eligibility assessment must include at a minimum:</p> <ul style="list-style-type: none"> <li>✓ Proof of HIV+ status</li> <li>✓ Proof of income</li> <li>✓ Proof of residency</li> <li>✓ Proof of active participation in primary care or documentation of the client's plan to access primary care               <ol style="list-style-type: none"> <li>1. At least one visit with a primary care provider every six months</li> <li>2. For affected children younger than four years old, at least one visit with a primary care provider within 12 months.</li> </ol> </li> </ul>	<ul style="list-style-type: none"> <li>• Client record</li> <li>• Policy on file</li> <li>• Agency client data report consistent with funding requirements</li> </ul>
B. Client is informed of services available and what client can expect if s/he enrolls in services, including methods and scope of service delivery. Clients will also be informed of the documentation requirements for services.	<ul style="list-style-type: none"> <li>• Client record</li> <li>• Client satisfaction survey</li> </ul>
C. Staff will provide client with referral information to other services, as appropriate.	<ul style="list-style-type: none"> <li>• Policy on file</li> </ul>

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<b>V. Service Coordination/Referral</b>	
<p>A. Agency staff act as a liaison between the client and other service providers to support coordination and delivery of high quality care. For those clients not in primary medical care, agency staff must note progress towards linking the client into primary medical care.</p>	<ul style="list-style-type: none"> <li>• Client record – documentation of with whom staff are communicating and progress to linking client to primary care if appropriate</li> <li>• Agency client data report consistent with funding requirements</li> <li>• Policy on file</li> </ul>
<b>VI. Clients' Rights and Responsibilities</b>	
<p>A. Client confidentiality policy exists for all service settings.</p>	<ul style="list-style-type: none"> <li>• Policy on file</li> </ul>
<p>B. Grievance policy exists.</p>	<ul style="list-style-type: none"> <li>• Policy on file</li> </ul>
<p>C. An up-to-date release of information form exists and is signed by the client.</p>	<ul style="list-style-type: none"> <li>• Policy on file</li> <li>• Client record, specifically a current release of information signed by client</li> </ul>
<p>D. Client will be informed of the client confidentiality policy, grievance policy, their rights and responsibilities and their eligibility for services.</p>	<ul style="list-style-type: none"> <li>• Documentation in client chart initialed or signed by client (chart review) showing that they have read or been informed</li> </ul>