

ATLANTA EMA QUALITY MANAGEMENT STANDARDS AND MEASURES

FOOD BANK/HOME-DELIVERED MEAL 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

Food Bank/Home-delivered Meals include the provision of actual food items, hot meals and vouchers to purchase food. Food Bank/Home-Delivered Meals may also include the provision of non-food items that are limited to personal hygiene products, household cleaning supplies and water filtration/ purification systems in communities where issues with water purity exist. Funds may not be used for permanent water filtration systems for water entering the house, household appliances, pet foods and other non-essential products.

All Food Bank/Home-delivered Meals provided by Ryan White funded agencies shall be: Medically appropriate, healthful and useable. These services shall be used as a support and to improve access and adherence to HIV/AIDS medical services. Agencies shall assure that no client receives any Ryan White (RW) funded Food Bank/Home-delivered Meal services unless such client is found to be eligible for services under such Eligibility Standards as may be adopted by the **Metropolitan Atlanta HIV/AIDS Health Services** Planning Council.

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 Nutrition Task Force and meetings with the Ryan White Part A Grantee.

Application of Standards

These standards apply to all agencies that are funded to provide Food Bank/Home-delivered Meal services.

Acknowledgements

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

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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"> • Policy and procedure manual • Grievance procedure posted in visible location
B. Agency has eligibility requirements for services in written form. This is inclusive of: <ul style="list-style-type: none"> ✓ Clients rights and responsibilities ✓ Release of information/confidentiality ✓ Eligibility for services 	<ul style="list-style-type: none"> • Policy on file
C. Agency is licensed and/or accredited and has current permits from the appropriate local/state/federal agency.	<ul style="list-style-type: none"> • Current licensure from appropriate local/state/federal agency • Up-to-date permits on file (if applicable)
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"> ✓ Physical agency safety <ul style="list-style-type: none"> • Meets fire safety requirements • Meets governmental food safety and sanitation regulations • Complies with Americans with Disabilities Act (ADA) • Is clean, comfortable and free from hazards • Complies with Occupational Safety and Health Administration (OSHA) infection control practices ✓ Crisis management and psychiatric emergencies <ul style="list-style-type: none"> • How to assess emergent/urgent vs. routine need • Verbal intervention • Non-violent physical intervention • Emergency medical contact information • Incident reporting • Voluntary and involuntary inpatient admission ✓ Refusal of services ✓ Client/Parent/Guardian Rights and Responsibilities (see Standard VII) 	<ul style="list-style-type: none"> • Policy on file • Site visit • Government inspection report (if applicable)

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I. Policies and Procedures (continued)	
Standard	Measure
D. (continued) <ul style="list-style-type: none"> ✓ Personnel <ul style="list-style-type: none"> • Roles and responsibilities of staff, including supervision responsibilities. Caseload or maximum staff/client ratio per following guidelines: <ul style="list-style-type: none"> ○ 1 full-time equivalent (FTE) registered dietitian (RD) per 500 in medical settings serving adults (18+) in diverse stages of the disease ○ 1 FTE RD per 250 in medical settings serving adults in acute stages of the disease ○ 1 FTE RD per 250 in pediatric clinics ○ 1 FTE RD per 2000 clients in community-based AIDS service organizations ○ 1 FTE RD per 1000 clients in AIDS meals and food service provider setting 	
E. Agency has private, confidential office space for individual counseling and education sessions with clients (e.g. no half-walls or cubicles, all rooms must have doors).	<ul style="list-style-type: none"> • Site visit
II. Program Staff	
A. Staff are trained and knowledgeable about HIV/AIDS and available resources.	<ul style="list-style-type: none"> • Training records
B. Staff have appropriate skills and relevant experiences to be providing food and/or nutrition services to people living with HIV. All professionals providing nutritional counseling and education services are registered dietitians.	<ul style="list-style-type: none"> • Current certifications on file • Training attendance in the past year on current nutritional issues and approaches
C. Staff receive supervision as required by licensure/certification.	<ul style="list-style-type: none"> • Personnel records • Training records
D. Staff have a clear understanding of their job description and responsibilities as well as agency policies and procedures.	<ul style="list-style-type: none"> • Written job description that includes roles and responsibilities and a statement of having been informed of agency policies and procedures on file signed by staff & staff supervisor/human resources manager • Confidentiality agreement signed by staff
E. Registered Dietitians participate in at least 75 hours of education/training within 60 months.	<ul style="list-style-type: none"> • Training/education documentation in personnel files

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III. Access to Services	
Standard	Measure
A. Agency is accessible to desired target populations. Accessibility includes: <ul style="list-style-type: none"> ✓ proximity to community ✓ proximity to mass transit ✓ proximity to low-income individuals ✓ proximity to underinsured/uninsured individuals ✓ proximity to individuals living with HIV 	<ul style="list-style-type: none"> • Site visit • Agency client data report consistent with funding requirements
B. Agency is compliant with ADA requirements for non-discriminatory policies and practices and for the provision of reasonable accommodations to address communication (e.g. sign language interpreter).	<ul style="list-style-type: none"> • Policy on file
C. Agency demonstrates the ability to provide culturally and linguistically competent services according to the Atlanta EMA standards for desired target population.	<ul style="list-style-type: none"> • Personnel and training records • Site visit • Client satisfaction survey
D. Agency demonstrates input from clients in service design and delivery.	<ul style="list-style-type: none"> • Client satisfaction survey • Existence of Consumer Advisory Board
IV. Counseling & Education	
A. All clients receiving outpatient ambulatory medical care through a Ryan White provider shall be provided medical nutrition therapy services (if desired) by a registered dietitian with experience in HIV care.	<ul style="list-style-type: none"> • Policy on file • Client record
B. Clients who request nutritional education or counseling shall receive this service within 30 calendar days.	<ul style="list-style-type: none"> • Client record
C. Basic nutrition education may be provided in a group session. Topics to be addressed at a minimum include: <ul style="list-style-type: none"> • basic nutrition needs • food and water safety • simple drug food interactions. 	<ul style="list-style-type: none"> • Client record • Session agenda

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IV. Counseling & Education (continued)	
Standard	Measure
<p>D. (continued) High risk clients (those with AIDS or symptomatic illness) should receive individual therapy geared to their specific conditions. Medical nutrition therapy shall include at a minimum:</p> <ul style="list-style-type: none"> ✓ Nutrition/dietary intake assessment ✓ Individual or cultural food preferences ✓ Client's weight, height, medications, allergy history, and history of other chronic disease (such as hypertension and diabetes) ✓ Use of appetite enhancers, supplements, complementary therapies, and vitamin and mineral supplements ✓ Client's nutrition-related symptoms (i.e. patterns of chewing, swallowing, nausea, vomiting, diarrhea and constipation) ✓ Need for nutritional supplements ✓ Socio-economic factors associated with nutrition (availability of food, etc.) ✓ Plans to link client into primary medical care with a designated time frame ✓ Counseling plan including nutritional goals 	<ul style="list-style-type: none"> • Client record
<p>E. Counseling provided must follow recommended guidelines based on the recommended current guidelines provided by the American Dietetic Association (ADA), Health Resources and Administration (HRSA) and Medical Nutritional Therapy (MNT).</p>	<ul style="list-style-type: none"> • Client record
<p>F. The Registered Dietitian will monitor and assess the nutritional status throughout the year and when needed will review the plan for medical nutritional therapy.</p>	<ul style="list-style-type: none"> • Client record • Agency client data report consistent with funding requirements
V. Food Bank	
<p>A. Provider determines client eligibility for services. The process to determine client eligibility must be completed in a time frame so that food services and/or nutritional counseling and education services are not delayed.</p>	<ul style="list-style-type: none"> • Client record • Agency client data report consistent with funding requirements
<p>B. Client is informed of the client confidentiality policy and grievance policy at first face to face contact.</p>	<ul style="list-style-type: none"> • Client record • Agency client data report consistent with funding requirements • Client satisfaction survey
<p>C. Agencies must utilize the appropriate guidelines for food banks as follows:</p>	<ul style="list-style-type: none"> • Site visit

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<ul style="list-style-type: none"> • Association of Nutrition Services Agencies' (ANSA) <i>Nutrition Guidelines for Agencies Providing Food to People Living with HIV Disease</i> for menu development, food production, transportation and food safety. 	<ul style="list-style-type: none"> • Form on file within designated timeframe signed by a registered dietitian that the guidelines were met • Whitman Walker clinic form
C. Food bank menu provided by agencies is reviewed by a RD biannually.	<ul style="list-style-type: none"> • Form on file within designated timeframe signed by a registered dietitian that the guidelines were met
D. Food distributed by food banks and others shall be fresh (for packaged food, not beyond the recommended expiration dates), free from filth or vermin and, until distributed to clients, properly stored and handled to maximize shelf life and minimize spoilage.	<ul style="list-style-type: none"> • Policy on file • Site visit
VI. Food Vouchers	
Standard	Measure
A. Provider determines client eligibility for services. The process to determine client eligibility must be completed in a time frame so that food services and/or nutritional counseling and education services are not delayed.	<ul style="list-style-type: none"> • Client record • Agency client data report consistent with funding requirements
B. Client is informed of the client confidentiality policy and grievance policy at first face to face contact.	<ul style="list-style-type: none"> • Client record • Client satisfaction survey
C. Expenditures for food shall be controlled to minimize opportunities for inappropriate use. If possible for reasonable cost, vouchers or debit cards shall be labeled or coded to prevent purchase of alcoholic beverages, tobacco products or games of chance. If possible, clients shall be asked to return to the agency a used or expired voucher to prevent its resale.	<ul style="list-style-type: none"> • Policy on file • Site visit
D. The standard amount of a food voucher shall be determined by local EMA directives. No client shall receive more than one voucher per month as determined by agency's eligibility criteria.	<ul style="list-style-type: none"> • Policy on file • Site visit
E. Special snack packs may be given to clients at medical sites when clients have had a significant amount of wait time that are 350 calories and have 10 grams of protein.	<ul style="list-style-type: none"> • Policy on file
VII. Home Delivered Meals	
A. Provider determines client eligibility for services. The process to determine client eligibility must be completed in a time frame so that food services and/or nutritional counseling and education services are not delayed.	<ul style="list-style-type: none"> • Client record • Agency client data report consistent with funding requirements
B. Client is informed of the client confidentiality policy and grievance policy at first face to face contact.	<ul style="list-style-type: none"> • Client record • Agency client data report consistent with funding requirements

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	<p>requirements</p> <ul style="list-style-type: none"> • Client satisfaction survey
VII. Home Delivered Meals	
Standard	Measure
<p>C. Agencies must utilize the appropriate guidelines for home delivered meals as follows:</p> <ul style="list-style-type: none"> • Association of Nutrition Services Agencies’ (ANSA) <i>Nutrition Guidelines for Agencies Providing Food to People Living with HIV Disease</i> for menu development, food production, transportation and food safety. • Current Georgia Dietetic Association’s <i>Diet Manual</i> for therapeutic menus 	<ul style="list-style-type: none"> • Site visit • Documentation of review of menu by RD
<p>D. Home delivered meal menus are reviewed by a registered dietitian quarterly.</p>	<ul style="list-style-type: none"> • Form on file within designated timeframe signed by a registered dietitian that the guidelines were met
<p>E. The provision of home delivered meals should include a distribution plan.</p>	<ul style="list-style-type: none"> • Written plan
VIII. Service Coordination/Referral	
<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"> • Client record – documentation of with whom staff are communicating and progress to linking client to primary care if appropriate
IX. Clients’ Rights and Responsibilities	
<p>A. Client confidentiality policy exists for all service settings.</p>	<ul style="list-style-type: none"> • Policy on file
<p>B. Grievance policy exists.</p>	<ul style="list-style-type: none"> • Policy on file
<p>C. An up-to-date release of information form exists and is signed by the client.</p>	<ul style="list-style-type: none"> • Policy on file • Client record, specifically a release of information signed within last year
<p>D. The agency has a formal policy as governed by Georgia law for clients who may be incapable of making their own treatment or care decisions.</p>	<ul style="list-style-type: none"> • Policy on file • Legal/medical consultation policy
<p>E. 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"> • Documentation in client chart initialed or signed by client (chart review) showing that they have read or been informed