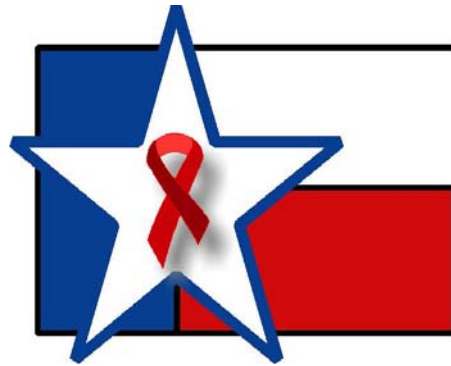


**BRAZOS VALLEY COUNCIL OF GOVERNMENTS**

**HIV/HEALTH SERVICES PROGRAM**



**POLICIES AND PROCEDURES**

**UPDATED  
AUGUST 2007**

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## **Scope:**

These policies and procedures will be applicable to all services funded by the Brazos Valley Council of Governments through the Texas Department of State Health Services for HIV Health Services. As necessary, the Brazos Valley Council of Governments will revise these policies and procedures to include any mandated changes by the Texas Department of State Health Services. These policies are required to be complied with in addition to any policies set by the Texas Department of State Health Services.

## **Definitions:**

**Accelerated Monitoring** is a temporary status in which more frequent or extensive monitoring is conducted than would routinely be done and monitoring visits may be announced or unannounced.

**Administrative Agent** is an agency funded to administer federal, state, or local funds. The administrative agent is responsible for a variety of tasks including verifying contract compliance and financial validity of the subcontractors billing. The Brazos Valley Council of Governments (BVCOG) is an administrative agent for DSHS, HRSA, and HUD.

**ARIES** (AIDS Regional Information and Evaluation System) is a data management program designed for collecting and reporting data from clients receiving services from AIDS services organizations. ARIES centralizes client data, service details, and agency and staff information to maximize the quality of care and services to clients in need.

**Central Texas HIV Administrative Service Area (CTHASA)** is composed of five health service delivery areas. It covers 43 counties of central Texas.

**Comment Period** refers to a period of 30 consecutive days during which anyone may contact BVCOG to offer comments or suggestions related to planning activities or products.

**Community Input** refers to anyone infected with HIV (consumer), affected by HIV (advocate), service provider (either contracted with BVCOG or non-contracted), and any person that expresses a desire to have input into the decision making process.

**Community Input Plan (Input Plan)** refers to the document “Plan for Community Input in the Central Texas Planning Area” submitted to and approved by the Texas Department of State Health Services (DSHS). The plan is attached to this policy as “Attachment A”

**Complaining Party** is a person living with HIV/AIDS, or a family member or friend acting on behalf of the client, who has a complaint against a BVCOG HIV subcontractor regarding HIV care.

**Compliance Criteria** are minimum standards or requirements that are dictated by the funding source or administrative agent.

**Confidential information** is any information that, if disclosed to unauthorized personnel, could be detrimental to HIV Administrative Services, HIV Administrative Services employees, or an individual.

**Contract** is a legally enforceable agreement by which goods, services, property or property rights are provided in return for considerations.

**Corrective Action** is an action required of a subcontractor to develop a detailed plan to correct a finding found by a reviewer or by staff who are monitoring subcontractor activities. The plan could include what will be done, who will do it, expected results, how progress will be monitored, and how long it will take to resolve the finding.

**Electronic Media** is electronic storage media including computer hard drives, removable digital memory medium such as tape, disk, CD, DVD, memory card, or transmission media used to exchange information. Transmission media includes the internet, an extranet, a private network, leased lines, dial-up lines, and the physical movement of electronic media.

**Emergency Actions** are immediate actions imposed on a subcontractor because:

- a. there is a high potential of danger to clients;
- b. subcontractor action or inaction presents a high possibility that serious harm or injury to patients or clients could occur, has already occurred or may well occur again if clients are not protected or the threat removed;
- c. the subcontractor is not meeting a performance measure;
- d. the subcontractor is being reimbursed for expenditures which are not in accordance with federal and/or state laws and regulations or contract provisions, or
- e. the subcontractor is spending funds inappropriately.

**Established Agency** is an agency that has been continually funded for services by the Brazos Valley Council of Governments for more than one year.

**Finding** is an area in which the agency failed to meet the required minimum compliance criteria.

**Follow-up Site Visit** is a site visit to ensure that the adopted Plan of Correction for a subcontractor's findings has been implemented.

**Funding Source** is any external agency/organization that provides funding to the Brazos Valley Council of Governments, either directly or indirectly (i.e., HUD, DSHS, HRSA).

**Grievance** is an allegation against an entity of wrongdoing, discrimination or an expression of dissatisfaction with services involving an immediate and serious threat to a client, misuse of resources by providers, or denial of services to clients.

**Health Service Delivery Area (HSDA)** is an area eligible for funds under Part B and DSHS HIV Health and Social Services (State Services). The Central Texas Planning area includes the Austin HSDA, Bryan-College Station HSDA, Concho Plateau HSDA, Temple Killeen HSDA, and Waco HSDA.

**High Priority Critical Service Needs** are service categories that are both high priority and have a strong relation to enrolling clients in and maintaining access to HIV-related medical services.

**Immediate and/or Serious Threat** is a situation presenting a high possibility that serious injury to clients could occur at any time, or already has occurred and may well occur again if clients are not protected effectively from the harm, or if the threat is not removed.

**Individual Identifiable Health Information** is any information, including demographic information that is created, transmitted, maintained, or received in any form or medium by a health care provider, health plan, employer, or health care clearing house that identifies an individual or with which there is a reasonable basis to believe the information could be used to identify an individual.

**Investigation** the process of gathering information sufficient to allow a decision to be made regarding the validity of the grievance, and/or determining what referrals should be made to ensure the grievance is handled by the appropriate entity.

**Newly Established Compliance Criteria** are any compliance criteria established or adopted since the date of the previous site visit.

**Newly Funded Subcontractor** is any agency receiving initial funding for HIV services through the Brazos Valley Council of Governments. Additionally, if an agency's funding has lapsed for a year or longer, the agency will be considered a newly funded subcontractor since compliance requirements will have changed enough to warrant the additional technical assistance from the Contract Monitor.

**Noncompliance** is a finding by a BVCOG reviewer or other DSHS staff wherein a subcontractor fails to perform or inadequately performs contract provisions that may result in emergency actions, corrective actions and/or sanction(s).

**Plan of Correction** is an established plan to address findings identified during a site visit.

**Planning Products** comprises four documents produced by BVCOG for planning. These documents include a needs assessment, priorities of service categories by HSDA, service category allocations by HSDA, and a comprehensive services plan.

**Probation** is a sanction in which the subcontractor may be placed on accelerated monitoring for a period not to exceed six months by which time items of noncompliance must be resolved or substantial improvements shown.

**Public Hearing** is modeled after the State of Texas definition, "A meeting of a house or senate committee or subcommittee during which public testimony may be heard and formal action may be taken on any measure or matter before the committee or subcommittee."<sup>1</sup> The purpose of a public hearing, as it relates to the input plan, is to go to the community and present the plan

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<sup>1</sup> <http://www.capitol.state.tx.us/tlo/resources/glossary.htm#P>

(comprehensive plan, including allocations) and obtain feedback regarding the plan. The BVCOG staff will review all comments and input from the hearings. The public hearing marks the opening of a 30 day comment period during which community members may provide input.

**Quality** is the degree to which a health or social service meets or exceeds established professional standards and user expectations.

**Quality Management** is the management of all activities through a systematic and determined focus on continual improvement, above minimum levels of performance set by a formal quality management standard. In order to continuously improve systems of care, evaluations of the quality of care should consider the service delivery process, quality of personnel and resources available, and outcomes.

**Reallocation of Funds** is the movement of funds *between service categories* (e.g., oral health care to drug reimbursement) within or across providers.

**Redistribution of Funds** is the movement of funds from one contract to a different contract within the same service category (e.g., moving drug reimbursement money from Service Provider A to Service Provider B).

**Request for Proposals (RFP)** is a document issued by the lead agency to solicit proposals based on a generalized scope of work. The document outlines the lead agency's requirements and criteria for the evaluation of offers.

**Reviewer** is a member of the BVCOG staff who conducts a site visit to audit or review subcontractor operations and/or administration of contract funds. The term also includes BVCOG staff who monitor subcontractor reporting requirements, financial accounting activities, or data management.

**Sanction** is an intervention or adverse action taken by BVCOG against or toward a subcontractor due to noncompliance with contract provisions, program performance, or an inability/unwillingness to resolve legitimate, substantiated complaints.

**Sensitive Information** is information that would cause a negative effect if it were lost or compromised.

**Serious Concerns** are any issues that might negatively impact the health and safety of clients receiving services.

**Services** are program activities offered by a provider on behalf of the subcontractor for health, medical, and/or social services.

**Subcontractor** is an agency that has entered into a contract with the Brazos Valley Council of Governments to provide services under Ryan White Title II, State Services, or HOPWA funds.

**Supplemental Site Visit** is a site visit conducted on an established agency to assess the agency's continued compliance with requirements and review the agency for compliance with additional guidelines implemented in the time period between site visits.

**Target Expenditure** refers to the percentage of a contract appropriate to have been spent at a given time period during a contract year. For example, a 12-month contract in its sixth month should be 50% spent.

**Technical Assistance** is any information or instruction needed from the Administrative Agent by the subcontractor to perform their contractual obligation(s) appropriately.

**Unduplicated Clients** refers to the number of unique clients receiving a service or being served at an agency.

**Units of Service** refer to the standardized quantified amount of services provided by an agency. Each service category includes a DSHS-defined unit definition – agencies use this definition to quantify the services they provide in terms of time, visits, payments, trips, etc.

**User** is a staff member of an AIDS services organization utilizing ARIES who has a user profile in ARIES.

## Section 1: Administrative Agency Policies

### §1.01 CONFIDENTIALITY OF HEALTH INFORMATION

POLICY:

Due to the private nature of individual and patient information, the Brazos Valley Council of Governments will take all steps necessary to protect the confidentiality of all identifiable information.

PROCEDURE:

- A. Physical Security
  - 1. All sensitive, confidential, or individual identifiable information (herein referred to as confidential information) will be secured in a locked cabinet that is in a locked room when not in use. All offices or storage areas that contain confidential information will be locked when no authorized personnel are present.
  - 2. All computers containing confidential information will be located in a secure area with electronic security devices installed, including username and password authentication, restricted user access to group drives, and password protected documents or encryption, as necessary.
  
- B. Communications
  - 1. Telephone conversations where confidential information is discussed will be done so that unauthorized personnel cannot overhear conversations.
  - 2. Mail for the HIV Administrative Services program will not be opened by BVCOG mail handlers. It will be delivered to the HIV program staff, where it is logged in and distributed to the intended recipient.
  - 3. Fax transmission, sending or receiving, of confidential information will be done in a secure area, available only to HIV program staff.
  
- C. Technical Safeguards
  - 1. All confidential information stored on other HIV Administrative Services' computers will be password protected to avoid unintentional disclosure.
  - 2. All electronic media that is no longer needed will be completely erased so as to ensure confidential information is not disclosed. In such a case that the electronic media cannot be erased, it will be destroyed to avoid unintentional disclosure.
  
- D. Security Breaches
  - 1. HIV Administrative Services shall use the reporting procedures established by the Brazos Valley Council of Governments.
  - 2. All BVCOG staff will be required to sign a confidentiality agreement, which will be maintained in the personnel files. Additionally, any volunteers or interns of the HIV Administrative Services program staff will be required to sign a confidentiality agreement.

- E. Regulatory Reference
  - 1. 45 CFR Parts 160 and 164 Standards for Privacy of Individually Identifiable Health Information
  - 2. Sections 1171 through 1179 Social Security Act
  - 3. Texas Health and Safety Code Chapters 81 and 181

## **§1.02 PROVISION OF PROGRAM DATA TO THE BOARD**

### POLICY:

Program data will be presented to the Brazos Valley Council of Governments (BVCOG) Board of Directors each month and will include, at a minimum, the following HIV program activities: planning, monitoring, data management, quality management, and technical assistance. Additionally, HIV service utilization, client satisfaction reports, and any grievances submitted to BVCOG will be reported on a quarterly basis.

### PROCEDURE:

1. HIV program staff will complete monthly reports no later than the Thursday before the last Friday of each month. Staff will use a standard format in completing their reports and will save them in the HIV group drive.
2. Staff will report their job-specific activities, including participation in quality management activities, technical assistance and trainings conducted, meetings held, and other pertinent information.
3. HIV service utilization, client satisfaction reports, and any grievances submitted to BVCOG will be reported on a quarterly basis in the January, April, July, and October reports. No identifying information will be included.
  - Client satisfaction information will include the geographic area surveyed, number of participants, and a summary of findings.
  - Grievance information will include a summary of the grievances submitted to BVCOG in the past quarter, a brief summary of the grievance, and resolution of the grievance, if completed, or a plan for resolution.
  - The utilization information to be presented will be summarized from the ARIES database and will include information about HIV service delivery and also information about the clients served (general information about the population, not client-specific). The data will be reported for the Central Texas HIV Administrative Service Area as a whole, as well as information specific to the Bryan/College Station HSDA and other information if requested by the Board.
4. The Program Manager will compile the information and submit the combined report to the BVCOG Office Manager for inclusion in the BVCOG Board of Directors meeting packet.
5. Budgetary information is provided to the BVCOG Board of Directors by the Finance Director. The BVCOG budget is presented and approved each year by the board, as well as any budget revisions. A statement of revenues and expenditures by program is also presented to the board, both a summary and detailed report by budget category, each month showing monthly and year-to-date expenditures.

### **§1.03 GRIEVANCE PROCEDURES FOR POTENTIAL SERVICE PROVIDERS**

#### POLICY:

Grievances concerning funding distribution are brought to the Administrative Agency, Brazos Valley Council of Governments, who is ultimately responsible for the administration of HIV funds. A grievance can be brought by agencies eligible to receive HIV Services funding that were not selected to receive funding through the Request for Proposals (RFP) process. Grievances will be submitted according to the procedure below.

#### PROCEDURE:

1. Proposers not selected by the RFP process may appeal the decision by submitting, within **3 business days** of the receipt of BVCOG notification of the award decision, a written Request for Debriefing to obtain information on the RFP process and how their proposal was received and ranked.
2. BVCOG shall acknowledge receipt of the Request for Debriefing in writing within **5 business days** of receipt, along with the date and time of the scheduled Debriefing.
3. The Debriefing shall be scheduled as soon as possible, and no later than 10 days from the receipt of the Request for Debriefing. (NOTE: A debriefing is offered as a courtesy to any proposer who is not selected for funding; the 10 day time frame must be adhered to only if a proposer is considering a grievance.) The purpose of the debriefing is to promote the exchange of information, explain the proposal evaluation system, and help unsuccessful proposers understand why they were not selected. Debriefings serve as an important educational function for new proposers. Debriefings will help them to improve the quality of future proposals. Additionally, staff hears direct feedback to help improve future proposals.
4. If, after the debriefing, the proposer wishes to continue with the grievance process, they must complete, sign, date, and submit the Grievance Form (see attached) to the Brazos Valley Council of Governments HIV Administrative Services Program Manager within **3 business days** after the day funding decisions have been publicly announced. Grievance forms are available from and must be filed at the Brazos Valley Council of Governments HIV Administrative Agency, 3991 East 29<sup>th</sup> Street, Bryan, Texas 77802.
5. The Program Manager will then submit copies of the grievance to the Executive Director of Brazos Valley Council of Governments within 24 hours of receipt.
6. After receipt of a grievance by the Administrative Agency, a determination will be made by a Grievance Review Committee, which will review grievances brought against the Administrative Agency. This committee will only determine if a grievance is valid in accordance with the accepted grievance procedures. The Grievance Review Committee will consist of the BVCOG Board Chairperson (or designee) who shall chair the committee, the BVCOG Board Vice Chairpersons (or designees) and two staff persons appointed by the Board Chairperson.
7. Grievances with respect to funding issues are brought by those directly affected by the outcome of the RFP process and any award decisions. This includes grievances that affect procurement issues such as:

- Deviations from the established selection of contractors and/or award process as established by Brazos Valley Council of Governments and/or the Texas Department of State Health Services.
  - Deviations from the process for any subsequent selection of contractors or awards; and
  - Other types of grievances may be sought and determined in accordance with local procurement procedures.
8. **Within 10 business days** after receiving a formal grievance, the Grievance Review Committee shall investigate all the facts surrounding the grievance, provide an impartial and objective analysis, and render a written decision(s) regarding the validity of the grievance and what action(s), if any, must be taken to fully remedy the issue. The written decision must be sent by registered mail to the grievant and a copy maintained on file by BVCOG for at least three years after the date of the ruling.
  9. If the dispute is not resolved in the above manner, the grievant may, within 3 business days of receipt of the decision, file a request for appeal of the decision to DSHS for final resolution.
  10. If the grievance resolution requires reallocation, the time involved in the grievance process and the timely distribution of funds will be taken into consideration. If the retroactive reversal of a decision will adversely affect the delivery of services to the community, an award shall be adjusted in the following grant reallocation process or possibly the next grant period.

#### **§1.04 QUALITY MANAGEMENT**

**POLICY:**

The HIV Administrative Services program of the Brazos Valley Council of Governments will perform tasks related to quality improvement in accordance with the Quality Management (QM) Plan developed by the HIV program. The purpose of the QM plan is to set forth a coordinated approach to addressing quality assessment and process improvement for the Brazos Valley Council of Governments, in its role as the HIV Administrative Agency (AA), and all eligible subcontractors. In following the Quality Management Plan, the AA will: (1) assess the extent to which HIV health services meet or exceed established professional standards and user expectations, and (2) develop strategies for ensuring that such services are consistent with the guidelines for improvement in the access to and quality of HIV services. The plan will be evaluated and updated on an annual basis. Quality improvement activities will be reported to DSHS on a quarterly basis and to the BVCOG board monthly.

## §1.05 CLIENT GRIEVANCE PROCESS

### POLICY:

Following the guidelines established by the Texas Department of State Health Services, the Brazos Valley Council of Governments has established a process for clients to file a grievance against a subcontractor. It is the policy of the Brazos Valley Council of Governments to effectively and promptly handle grievances from persons living with HIV/AIDS, or family members and friends acting on behalf of the client, living within the Central Texas HIV/AIDS Planning Area. If the violation is of a clinical nature, BVCOG's Clinical Monitor will be involved in the investigation and resolution of the complaint.

The complaining party is first encouraged to utilize the internal grievance procedures of the subcontractor concerning programs funded by the contract. However, the client always has the right to file a grievance directly with BVCOG by phone or in writing via mail, fax, or email.

A grievance may be filed by a complaining party on one or more of the following grounds: improper application of rules, regulations, and procedures (but not the rules, regulations and procedures themselves); unfair or improper treatment; discrimination based on race, religion, color, sex (including sexual harassment), sexual orientation, age, disability, or national origin. The complaining party shall not be discriminated against nor suffer retaliation as a result of filing a grievance in good faith or participating in the investigation of a grievance.

### PROCEDURE:

1. Grievances Regarding an Immediate and/or Serious Threat. Grievances regarding an immediate and/or serious threat to the client should be reported immediately to BVCOG's HIV Program Manager. Staff uncertain about whether a grievance poses an immediate and/or serious threat should immediately contact the HIV Program Manager for clarification. BVCOG will refer grievances of a clinical nature that pose an immediate and/or serious threat to the DSHS HIV/STD Clinical Resources Division.
2. Reporting a Grievance. If the complaint cannot be resolved through communication between the complaining party and the subcontractor, or if the complaining party is not comfortable complaining to the subcontractor, the complaint may be made directly to BVCOG. The following procedures apply to complaints made directly to BVCOG:
  - Complaints concerning subcontractors may be made to BVCOG via telephone, email, fax, or mailed letter.
  - The identity of the complaining party(ies) will remain confidential unless explicit permission to reveal their identity is obtained by BVCOG. Complaining party(ies) also may remain anonymous while reporting to BVCOG.
  - BVCOG will utilize the BVCOG HIV/Health Services Complaint Intake Form to document incoming complaints. This electronic record is password-protected and all physical documentation pertaining to the complaint (e.g. faxes, letters) will be stored in a locked file cabinet within the HIV/Health Services office.
  - Once the full complaint is recorded, BVCOG will begin investigating the complaint immediately.

3. BVCOG's process for investigating a grievance regarding HIV services. The HIV Contract Monitor and Program Manager of the BVCOG will investigate all verbal and/or written grievances provided that sufficient information is available. Investigations involving immediate and/or serious threats are given the highest priority. Grievances involving discrimination will be investigated in order to determine the best way to respond to the grievance. BVCOG's investigation of public grievances regarding contractual services will focus on the fairness and completeness of the grievance process used by the provider, or its agent, as well as implementation of processes to resolve the grievance itself.
4. Time frames. If requested, the complaining party will receive an initial written acknowledgement from the HIV Program Manager within **ten (10) working days** following receipt of the written grievance. The response time may be longer if the Program Manager is unavailable at the time the grievance is received. This acknowledgement will outline the process for reviewing and responding to the grievance (including who will be involved in the process, the projected timeline, and who will respond in writing to the complainant). The subcontractor and complaining party, if the complainant has agreed to be contacted again regarding the complaint, will receive a written response to the grievance within **twenty (20) working days** following receipt of the written grievance,. The response will outline the steps that will be taken to try and resolve the conflict. BVCOG will try and resolve conflicts as quickly as possible and, where appropriate, with the least amount of formality. Steps that will be used in resolving conflicts will most often include conference calls and meetings between BVCOG and subcontractors. Should BVCOG not be able to complete the investigation and resolve the issue within 20 working days, the complaining party will be notified and BVCOG will have an additional 20 working days to complete its investigation and resolve the issue.

After investigating the grievance, HIV Administrative Services will:

- Dismiss the grievance, should there be a lack of sufficient evidence or cause to proceed, or
  - Request a corrective action from the subcontractor, which will outline the protocols and strategies utilized to address the issue.
5. Appeal Process. Should the conflict not be resolved to the complaining party's satisfaction, the complaining party may appeal to the Texas Department of State Health Services. The grievance should be submitted in writing to the Civil Rights Office in accordance with time frames stated in their policy, be signed by the complainant, and contain the following information:
    - a. The full name, work address and home address of the complaining party submitting the grievance;
    - b. The organization from which the grievance arose;
    - c. A concise statement of the facts of the grievance to include the identity of the person(s) alleged to have committed a wrongdoing or discriminated against the complaining party; and,
    - d. The remedy/solution sought by the complaining party submitting the grievance.

## **§1.06 AA NEW EMPLOYEE ORIENTATION AND TRAINING**

### POLICY:

It is the policy of the Brazos Valley Council of Governments HIV Administrative Services Program to provide training and orientation to new employees of the program, in addition to and in conjunction with the orientation procedures outlined in the BVCOG policies and procedures. HIV program orientation and training will be limited to knowledge and skill building specific to the AA roles and responsibilities, as well as program and contract requirements.

### PROCEDURE:

1. New employee orientation for job-specific requirements will be conducted by both the Program Manager and the current employee, whenever possible. If an overlap in employment by the current and new employee is not possible, then training and orientation will be solely the responsibility of the Program Manager, who will involve other program staff in the orientation of the new employee as necessary and appropriate.
2. At a minimum, new employees will be trained on the topics outlined in the attached chart, in addition to a list of required readings and external trainings or meetings appropriate to the position. The orientation plan will be implemented in accordance with the following timeline:
  - Reading materials will be provided at the start of employment and should be completed within the first 2 weeks. The employee's manager will discuss the materials with the employee to ensure the employee fully understands the content.
  - In-house training will be conducted on an ongoing basis throughout the first month of employment.
  - External trainings and meetings will be scheduled within the first 90 days of employment whenever possible, as scheduling or budgeting constraints allow.
3. At the end of the 90-day introductory period, the employee's supervisor will conduct a performance evaluation to determine whether the employee has met the minimum standards and what, if any, further trainings are needed. The supervisor will then develop a staff development plan to outline any further training needed for the employee to meet the standards, including a timeline for completion and re-evaluation. The performance standards should be met within 6 months of employment, unless particular activities in the standards have not yet occurred or another timeframe is specified by the supervisor in the staff development plan.
4. BVCOG's contracted Clinical Monitor will be selected through a competitive process to ensure the individual is qualified with an appropriate clinical background. Additional trainings will be scheduled as the need is identified based on the qualifications of the selected applicant. The Program Manager will provide orientation on BVCOG reimbursement and contracting procedures and may work with DSHS clinical staff as needed to ensure appropriate trainings are identified.
5. BVCOG's Fiscal Monitor will be trained by the Finance Director and will receive additional training specific to HIV funding and program requirements by the HIV Program Manager.

	<b>Reading Materials</b>	<b>Training Topics (in-house)</b>	<b>Meetings, Shadowing, or External Trainings</b>
All HIV Program Staff	<ul style="list-style-type: none"> <li>• HIV program policies, procedures and plans</li> <li>• Texas Department of State Health Services HIV policies (global policies and HIV service policies)</li> <li>• Administrative Agency Roles and Responsibilities</li> <li>• HRSA Ryan White Title II Manual</li> <li>• DSHS contract provisions, current work plans and performance measures</li> <li>• Reporting forms, previous subcontractor and AA quarterly reports, and monthly reports to the BVCOG board</li> <li>• Ryan White CARE Act of 2000 (with compilations)</li> <li>• Ryan White HIV/AIDS Treatment Modernization Act of 2006 (Public Law 109-415)</li> <li>• House Report 109-695</li> <li>• Measuring What Matters: Allocation, Planning, and Quality Assessment for the Ryan White CARE Act</li> <li>• Public Financing &amp; Delivery of HIV/AIDS Care: Securing the Legacy of Ryan White</li> </ul>	<ul style="list-style-type: none"> <li>• Overview of the entire program, each staff member's roles, structure of the HIV service system in Texas, and other broad program and funding information</li> <li>• ARIES (entry requirements, reports available, how the data are used, etc) and the data reporting process/structure</li> <li>• Reporting requirements (quarterly reports, BVCOG monthly report, etc)</li> <li>• Basic and relevant AA budget information, including travel and other budgeted activities, allowable and unallowable costs, and documentation of expenses/ BVCOG policies regarding expense documentation and processes</li> <li>• Quality management: federal and state requirements, BVCOG QM program</li> </ul>	<ul style="list-style-type: none"> <li>• Individual needs identified below</li> </ul>
Program Manager	<ul style="list-style-type: none"> <li>• Subcontractor contracts and correspondence</li> <li>• Previous site visit reports</li> <li>• Previous site visit reports from DSHS monitoring visits of BVCOG</li> <li>• Previous HIV program expenditure and budget information</li> <li>• 2006 Central Texas HIV/AIDS Planning Area Needs Assessment</li> <li>• 2007 - 2009 Central Texas HIV/AIDS Planning Area Comprehensive Services Plan</li> <li>• Current Data Improvement Plan</li> <li>• ARIES User Manual</li> <li>• DSHS HIV Services Taxonomy, including definitions and acceptable use</li> </ul>	<ul style="list-style-type: none"> <li>• BVCOG management procedures and processes, including staffing, check requests, credit card usage, etc.</li> <li>• HOPWA program and reporting requirements</li> <li>• Previous HOPWA training materials</li> <li>• Monitoring process from initiation through closeout</li> <li>• RFP and contract development process</li> <li>• Contract amendments</li> <li>• Subcontractor reporting and expenditure monitoring</li> <li>• Overview/training on the planning process: needs assessments, priority setting,</li> </ul>	<ul style="list-style-type: none"> <li>• Management training as available and identified by HR</li> <li>• Attend site visits of BVCOG subcontractors</li> <li>• Attend meeting of the Austin Part A Planning Council to become familiar with the planning process in that area</li> </ul>

		<p>comprehensive plan development and implementation, allocations/reallocations process, community input</p> <ul style="list-style-type: none"> <li>• ARIES training: reporting requirements, monitoring and oversight of data quality, current status of subcontractor compliance with data requirements</li> <li>• AA contract and budget, AA expenditure tracking and previous expenditures</li> </ul>	
Contract Monitor	<ul style="list-style-type: none"> <li>• DSHS HOPWA Manual</li> <li>• DSHS Clinical/Case Management Standards</li> <li>• Federal HOPWA Regulations</li> <li>• Previous site visit reports</li> <li>• 2006 Central Texas HIV/AIDS Planning Area Needs Assessment</li> <li>• 2007 - 2009 Central Texas HIV/AIDS Planning Area Comprehensive Services Plan</li> </ul>	<ul style="list-style-type: none"> <li>• HOPWA program and reporting requirements</li> <li>• Previous HOPWA training materials</li> <li>• Monitoring process from initiation through closeout</li> <li>• RFP and contract development process</li> <li>• Contract amendments</li> <li>• Subcontractor reporting and expenditure monitoring</li> </ul>	<ul style="list-style-type: none"> <li>• Not necessary – training can be provided by Program Manager and current Contract Monitor, when possible</li> </ul>
Planner	<ul style="list-style-type: none"> <li>• 2007 Priority Setting Methodology</li> <li>• 2006 Central Texas HIV/AIDS Planning Area Needs Assessment</li> <li>• 2007 - 2009 Central Texas HIV/AIDS Planning Area Comprehensive Services Plan</li> <li>• Administrative Agency Planner Performance Standards, Expectations, Core Competencies, Duties and Required Activities</li> </ul>	<ul style="list-style-type: none"> <li>• Overview/training on the planning process: needs assessments, priority setting, comprehensive plan development and implementation, allocations process, community input</li> <li>• Contracting and budgeting process with BVCOG subcontractors, reallocations</li> <li>• Monitoring process and how it ties into planning</li> <li>• ARIES capabilities and information available, including sample reports, specific to the planning process</li> </ul>	<ul style="list-style-type: none"> <li>• Open Meetings Act training from TX Office of Attorney General</li> <li>• Meet with planners from DSHS</li> <li>• Meet with Austin Part A Office of Support (Council Coordinator and Planner)</li> <li>• Meet with Austin Part A Administrative Agent</li> <li>• Attend meeting of Austin Part A Planning Council</li> </ul>
Data Manager	<ul style="list-style-type: none"> <li>• 2007 - 2009 Central Texas HIV/AIDS Planning Area Comprehensive Services Plan</li> <li>• 2006 Central Texas HIV/AIDS Planning Area Needs Assessment</li> <li>• ARIES User Manual</li> </ul>	<ul style="list-style-type: none"> <li>• Shadow departing BVCOG data manager</li> <li>• Current data monitoring process and timelines</li> <li>• Connection between data management, planning, and contract monitoring</li> </ul>	<ul style="list-style-type: none"> <li>• Advanced MS Access training, if needed</li> <li>• Meet with Austin Part A Administrative Agent data manager and program manager</li> </ul>

	<ul style="list-style-type: none"> <li>• DSHS HIV Services Taxonomy, including definitions and acceptable use</li> <li>• Previous site visit reports</li> <li>• DSHS ARIES Data Manager Core Competencies</li> </ul>	<ul style="list-style-type: none"> <li>• Ryan White Program Data Report Form (formerly CADR) processes, timelines, and best practices training from current BVCOG data manager</li> <li>• ARIES ReportExport report creation and troubleshooting, ARIES Client troubleshooting, frequent provider agency questions</li> <li>• Processes for creating/deactivating: agencies, users, contracts</li> <li>• ARIES data security</li> <li>• General ARIES Client use and administration</li> </ul>	<ul style="list-style-type: none"> <li>• Shadow Part B AA data manager, preferably Clay Allison at HIV Resource Group</li> <li>• Meet with DSHS Part B data management contacts</li> <li>• Conference call or individual phone meetings with all subcontracting agencies</li> </ul>
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## **§1.07 INTERNAL REVIEW OF EXPENDITURE AND UTILIZATION DATA**

### POLICY:

The HIV Administrative Services Program will meet to review subcontractor expenditures and service utilization on a monthly basis. During the review, HIV Administrative Services Program staff will identify utilization and expenditure trends for planning and monitoring purposes. Data will be examined for accuracy, completeness, and allowability. Expenditures will be reviewed to ensure subcontractors are on target with projected expenditures and performance measures, to determine whether reallocations are necessary, and to ensure expenditures are consistent with the utilization data.

### PROCEDURE:

- A. The monthly utilization and expenditure review meeting will be attended by the HIV Program Manager, Contract Monitor, Planner, and Data Manager. If one of the staff members is unable to attend, they are responsible for reviewing the expenditure and utilization reports and providing any feedback to the Program Manager within a given timeframe.
- B. Data sources
  1. Expenditures will be reviewed using the monthly FSRs and Service Category Expenditure reports submitted by subcontractors, which are due to BVCOG the 15<sup>th</sup> of each month for the preceding month's expenditures. The BVCOG Contract Monitor will compile all FSRs and Service Category Expenditure reports and present them to the HIV program staff. The Service Category Expenditure reports will include the following information for each HIV services contract:
    - a. Monthly expenditures by primary service category
    - b. Cumulative expenditures by primary service category
    - c. For direct, administrative, and total expenditures:
      - i. Total monthly expenditures
      - ii. Cumulative expenditures
      - iii. Allocation remaining
    - d. Explanations for any service category expenditures more than 10% off target
    - e. Description of trends or patterns in expenditures
  2. The Contract Monitor will also present HOPWA FSRs and Detailed Expenditures Reports for review by program staff. Staff will review expenditures in Tenant-Based Rental Assistance (TBRA), Short Term Rent, Mortgage and Utilities (STRMU), Supportive Services, Permanent Housing Placement Services, and Administrative Costs.
  3. Utilization will be reviewed using service delivery information entered into ARIES by subcontractors. The BVCOG Data Manager will compile this information using a combination of ARIES cross-tab reports and ad hoc reports. Reports presented to the HIV program will include the following data by subcontractor:
    - a. Unduplicated clients served per month
    - b. New clients enrolled per month

- c. Current number of active clients
- d. Units of service by program/primary category and month of service
- e. Unduplicated clients by program/primary category and month of service
- f. For each BVCOG contract:
  - i. Unduplicated clients and units of service by program/primary category for contract year-to-date;
  - ii. Unduplicated clients and units of service by program/primary/secondary category for contract year-to-date;
  - iii. Unduplicated clients and units of service by program/primary category for the previous month;
  - iv. Unduplicated clients and units of service by program/primary/secondary category for the previous month

C. Review of subcontractor expenditures

1. Prior to the monthly meeting:

- a. The Contract Monitor will receive monthly FSRs with the attached Service Category Expenditure report and record the date and time the reports were received into the reports log. The Contract Monitor will then file a copy and forward the original documents to the HIV Program Accountant.
- b. The Accountant will review the FSRs for expenditures from the subcontractor's 8-category budget and compare the reimbursement request to the agency's backup documentation (general ledger). The Accountant may follow up with the subcontractor to discuss any problems or to clear up any questions the Accountant may have. The Accountant will then submit the FSRs, Service Category Expenditure report, and backup documentation to the HIV Program Manager with a note showing that it has been reviewed and is cleared for payment.
- c. The Program Manager will review the documents to ensure there are no over-expenditures. The Program Manager will complete and sign a check request and forward all of the attached documents to the Executive Director for signing, then to the Finance Department for processing. If the subcontractor is over 100% spent in any service category, the Program Manager will contact the subcontractor to discuss the overexpenditure(s) and to request a revised reimbursement request.
- d. The Contract Monitor will review the Service Category Expenditure reports for accuracy and completeness. The Monitor will compare the percent where the agency should be spent at that point to the percent of actual expenditures for each service category. The Monitor will make notes of any service categories that are over- or under-expended, as well as any other significant findings from the expenditure reports, and contact subcontractors regarding any unexplained expenditures more than 10% off target.
- e. Any areas identified in the reports that warrant immediate action or clarification will be brought to the Program Manager as soon as possible. On a quarterly basis, the Contract Monitor will also review the quarterly reports from subcontractors to compare expenditures to other items reported, such as funding issues, staffing changes, progress on performance measures, etc. The quarterly reports will also be discussed at the HIV Program meeting with all AA staff.

2. At the monthly meeting:
  - a. Contract Monitor will distribute FSR and SCE forms for the previous month, along with current target expenditure percentages for each contract;
  - b. All attendees will review expenditures and discuss any off-target amounts, trends, possible reallocation needs, and any inconsistencies with the utilization data;
  - c. Topics needing additional clarification from subcontractors or opportunities for reallocation will be compiled by the Program Manager.
  
- D. Monthly review of service utilization
  1. Prior to the monthly meeting, the Data Manager will compile utilization reports, as described above, and distribute to HIV program staff;
  2. At the monthly meeting, all attendees will review the utilization information for each subcontractor alongside expenditure data to identify trends in use;
  3. Topics needing additional clarification from subcontractors will be compiled by the Program Manager.
  
- E. After each monthly meeting, the Program Manager will compile questions and comments for each subcontractor and email to the subcontractor contact. Each subcontractor will be provided a timeline for responding and responses will be used to guide reallocations and ensure the AA is aware of the status of expenditures/utilization at each agency.
  
- F. If AA staff identify a potential overspending or lapse in HOPWA funds, the AA will first contact the subcontractor to determine the cause. If overspending is the problem, the AA will work with the subcontractor to determine the best strategies for ensuring funds are available for the remainder of the contract year, which may include prioritizing clients who need HOPWA assistance or implementing restrictions or caps in accordance with BVCOG's policy §2.11, "Setting Restrictions on Client Services or Payment Amounts." If a subcontractor expects a lapse in funds, BVCOG will work with the subcontractor to determine the amount of anticipated unspent funds and will contact DSHS to determine whether that money can be reallocated to another agency.
  
- G. Additional review of data quality: The Data Manager will complete a desktop review of each subcontractor's data entries on a quarterly basis using the BVCOG Quarterly Data Desktop Review tool. Subcontractors will be notified of deficiencies and be provided with a deadline for making corrections.

## **Section 2: Subcontractor Policies**

### **§2.01 TECHNICAL ASSISTANCE**

#### **POLICY:**

Due to the various needs that will arise for subcontractors, the Brazos Valley Council of Governments will provide technical assistance at the start of a contract for newly funded subcontractors and on an as-needed basis throughout the contract period. The responsibility lies with the subcontractor to request additional technical assistance after the initiation of a contract. BVCOG may also initiate technical assistance as a need is identified.

#### **PROCEDURE:**

##### **A. Contract Start-Up**

1. Within three (3) months of the date that an agency commences services, the Contract Monitor will schedule an Orientation Site Visit. This site visit will be conducted consistent with the policy on *Monitoring Newly Funded Subcontractors*.
2. BVCOG staff will request certificates and provide initial training on the URS system to the staff responsible for data entry and quality management. This will be done in a reasonable timeframe as established by BVCOG and the agency.

##### **B. Further Technical Assistance**

1. As the Brazos Valley Council of Governments becomes aware of significant changes in contract requirements, the AA staff may schedule a subcontractor meeting as necessary and as funding allows. The Monitor may also send out information via e-mail or coordinate conference calls in order to conserve funds.
2. If the changes are minor, the Contract Monitor will explain the changes via e-mail.
3. The Brazos Valley Council of Governments will provide training requested by the subcontractor as needed for the URS system.
4. The Brazos Valley Council of Governments will also provide additional technical assistance as needed. Technical assistance will be provided mainly through e-mails, phone calls, meetings, and through the Administrative Agency's website. AA staff will first attempt to resolve technical issues by phone or email. If TA is provided by phone, the AA staff will send a follow-up e-mail so both parties have the information in writing. Site visits will also be conducted as warranted by program needs.

##### **C. Requests for Technical Assistance**

1. Technical assistance needs that are minor and can be addressed quickly should be completed over the telephone or by email when appropriate.
2. For technical assistance needs that cannot be addressed over the telephone or email, requests should be made in writing, and sent to the Administrative Agency.

3. The Administrative Agency staff has five (5) business days to attempt contact regarding the request. This timeframe may be extended if the appropriate staff is unavailable.
4. If a request is made in writing and the appropriate staff is unavailable, the request may be forwarded to the Program Manager and/or Executive Director for an attempt at contact.
5. When contact is made, the Administrative Agency staff member will assess the request and determine the most appropriate response with the agency.
6. Technical assistance requests will be logged in the Technical Assistance Log.

## **§2.02 RESOLVING CONFLICTS WITH SUBCONTRACTORS**

### POLICY:

The subcontractor shall utilize its internal complaint procedures for all complaints made by the Subcontractor, participants, or other persons concerning programs funded by the Contract. If the complaint cannot be resolved at the subcontractor level, the complaining party has the right to file a complaint with the Brazos Valley Council of Governments.

The Brazos Valley Council of Governments will provide a process by which conflicts with subcontractors can be addressed and resolved quickly. A subcontractor shall not be discriminated against nor suffer retaliation as a result of filing a complaint in good faith or participating in the investigation of a complaint.

A grievance may be filed by an employee, subcontractor, or client on one or more of the following grounds: improper application of rules, regulations, and procedures (but not the rules, regulations and procedures themselves); unfair treatment; illegal discrimination based on race, religion, color, sex (including sexual harassment), age, disability, or national origin; improper application of fringe benefits; or improper working conditions. It is the policy of BVCOG, insofar as possible, to prevent the occurrence of grievances and to deal promptly with those that occur. All subcontractors, clients, and BVCOG employees shall follow the grievance procedures covered under section 15.0 of the BVCOG policies and procedures manual.

### PROCEDURE:

1. Informal Complaints. The first step in the conflict resolution process is for the complaining party to attempt to resolve the conflict by some form of informal conference with the Program Manager. If this informal conference does not result in a resolution of the problem(s) that is satisfactory to all parties, a formal written complaint may be filed.
2. Formal Complaints. Formal complaints must be in writing, signed by the complaining party, and presented to the Program Manager. A statement of the specific remedial action requested by the complaining party must be included in the written complaint.
3. The HIV Program Manager of the BVCOG will review the complaint in order to determine the best way to respond to the complaint.

4. The subcontractor will receive an initial written acknowledgement from the HIV Program Manager within ten (10) working days following receipt of the written complaint. The response time may be longer if the Program Manager is unavailable at the time the complaint is received. This acknowledgement will outline the process for reviewing and responding to the complaint (including who will be involved in the process, the projected timeline, and who will respond in writing to the complainant).
5. The subcontractor will receive a written response to the complaint within twenty (20) working days following receipt of the written complaint, sending a copy of the response to the Executive Director. The response will outline the steps that will be taken to try and resolve the conflict. BVCOG will try and resolve conflicts as quickly as possible and, where appropriate, with the least amount of formality. Steps that will be used in resolving conflicts will most often include conference calls and meetings between BVCOG and subcontractors.
6. If the conflict is not resolved to the subcontractor's satisfaction, the subcontractor may appeal to the Executive Director. The appeal must be made in writing to the Executive Director, specifying the reason(s) for the appeal. At the time of the appeal, the Executive Director will determine the process for reviewing and responding to the appeal (including who will be involved and the projected timeline for reviewing and responding to the appeal).
7. If the conflict is not resolved to the subcontractor's satisfaction following the appeal, the subcontractor can submit a complaint to the Department of State Health Services.

### **§2.03 COLLECTION OF CLIENT AND CUSTOMER SATISFACTION INFORMATION**

#### POLICY:

It is the policy of BVCOG to collect client and customer satisfaction information for use in quality improvement activities. BVCOG will collect information from subcontractors to assess their level of satisfaction with services provided by the HIV program. Subcontractors are required to collect client satisfaction information to determine whether the services provided are meeting the needs of the clients. BVCOG will also directly collect satisfaction information from clients as a part of the annual monitoring process. All of the information collected will be used by subcontractors and BVCOG to improve services provided.

#### PROCEDURE:

- A. BVCOG Subcontractor Satisfaction with the Administrative Agency
  1. BVCOG will send an email to all subcontractors at the end of each Ryan White grant year requesting them to provide anonymous feedback to the AA using an online satisfaction survey, posted to BVCOG's HIV website at <http://hiv.bvcog.org>.
  2. The survey requests feedback using a 5-point satisfaction scale assessing the following areas: subcontractor selection, contract monitoring, timely reimbursements, technical assistance, data management, contract initiation and revisions, and assistance with reallocation requests. The survey also includes four open-ended questions asking what

has worked well with the AA, what has not worked well, what recommendations they have for improvement, and a request for additional comments or suggestions.

3. Subcontractors are asked to complete the survey within a 2 week timeframe. Surveys are completed online and returned anonymously to the HIV website administrator.
4. The HIV Program Manager sends out a reminder email prior to the due date to encourage participation.
5. The surveys are forwarded to the BVCOG HIV Program Manager to compile the results.
6. The Program Manager forwards the results to the AA staff and the QM committee.
7. The QM committee meets to discuss the results and to determine what AA services can be improved/addressed based on the results. The committee develops a plan, using the PDSA method, on which changes to test, how to test and implement the changes, what the timeframe will be, and which staff will be involved. The AA will also discuss what kinds of technical assistance or trainings were identified as a need from subcontractors and how to implement those activities.

#### B. BVCOG Subcontractor Satisfaction Surveys

1. BVCOG subcontractors are required to collect client satisfaction information annually. Subcontractors must include, at a minimum, questions that assess each of the service categories they are funded to provide.
2. The survey should be appropriately worded to elicit potential barriers to access, cultural competency, and quality (e.g., general satisfaction, client participation, perceived outcomes, continuity of care, effectiveness or result of service, timeliness of care, customer service/staff skills).
3. BVCOG will review client satisfaction surveys and responses to ensure the above requirements are met.
4. Subcontractors must distribute the surveys to all active clients and document that all clients were given an equal chance to participate. Subcontractors are encouraged to employ other methods of advertising the surveys as well, such as flyers posted at the agency where they would be visible to clients and blank surveys available onsite for clients to pick up if they did not receive or lost their copy.
5. Surveys must be distributed to clients in a way that allows them to return the surveys anonymously, including instructions asking clients to not to provide their name, avoiding any type of coding on the surveys, and avoiding questions that might otherwise identify the client, such as county of residency.
6. Subcontractors must implement methods to encourage client participation and maximize the return rate of surveys, including providing a self-addressed stamped envelope, providing a drop box in the office, sending multiple mailings, calling all clients to encourage participation, etc.
7. Providers are required to apply this information to program improvement efforts, when possible. BVCOG will review documentation during regular monitoring visits that surveys were analyzed, shared with all staff, reviewed to determine ways to improve services, and testing/implementing changes to services.
8. Providers are required to report activities related to collection of client satisfaction information on the quarterly report submitted to BVCOG. Results of surveys and any other relevant documentation should be attached to the report.

9. BVCOG's QM Committee will review each quarterly report for client satisfaction data and will use any relevant information collected from the surveys for quality improvement efforts. BVCOG will work with subcontractors to implement needed changes.

C. BVCOG Collection of Client Satisfaction Information.

1. BVCOG includes the collection of client satisfaction information as a part of regular monitoring visits.
2. Three weeks prior to a site visit, BVCOG will send notification to the subcontractor that BVCOG will be collecting client satisfaction information, along with a letter for the subcontractor to send to all of their clients. The letter will be addressed to the client from the subcontracting agency providing instructions to contact BVCOG using a toll free number during specified dates and times.
3. This self selection process allows clients to choose whether they want to participate while maintaining their anonymity, without adding confusion and potentially raising confidentiality concerns if they were to receive mail directly from BVCOG.
4. Clients who choose to be a part of the survey call and speak to the Contract Monitor who provides basic information regarding the survey and then conducts the survey over the phone.
5. The survey consists of 17 questions relating to the quality of services they receive, with a focus on case management, referrals, and access to care.
6. There are no findings associated with the client surveys, but the information gathered from the surveys may assist monitors in identifying areas needing attention during the site visit. The answers to the surveys are compiled and the agency receives a copy of the results with the site visit report.
7. Results from the client satisfaction phone surveys are forwarded to the BVCOG QM Committee for review. Any concerns identified will be addressed using the process outlined in the QM plan.

## **§2.04 SUBCONTRACTOR CLIENT COMPLAINT PROCESS**

POLICY:

The Brazos Valley Council of Governments has established required elements for a subcontractor's client complaint process.

PROCEDURE:

1. Subcontractors must have a client complaint process that includes the following:
  - a. Assurance that the process will be conducted in an impartial and timely manner.
  - b. Assurance that, if requested, client confidentiality will be protected during the process.
  - c. Assurance that clients and their caregivers have the right to file and pursue grievances without fear of loss of services or any form of retaliation.
  - d. Assurance that the complainant will be provided with a written response regarding the result of the complaint.

- e. For DSHS-funded clinical and case management services, there must be a policy and procedure in place reflecting that a clinician with appropriate training and credentials to evaluate quality of care must evaluate complaints of a clinical nature.
  - f. When there is or may be a conflict of interest in having a member of the agency staff review the care, the complaint should be referred to the Clinical Resources Division at DSHS for complaints regarding clinical care and to BVCOG regarding services other than clinical care.
  - g. Client must have the option of contacting BVCOG or DSHS at any point in the grievance process to have their grievance investigated by BVCOG or DSHS staff. This must be included in the written policy along with updated contact information for DSHS and BVCOG.
  - h. Timelines must be imposed for processing the complaint to ensure a rapid response.
2. For Housing Opportunities for Persons with AIDS (HOPWA) services, the subcontractor may terminate assistance to a participant who violates program requirements; however, subcontractors should terminate assistance only in the most severe cases. The subcontractor may resume assistance to a participant whose assistance was previously terminated. In terminating assistance to a participant, the subcontractor must provide a formal process that recognizes the rights of the individual receiving assistance to due process of law. This process, at a minimum, must consist of:
- a. Written notice to the participant containing a clear statement of the reason for termination;
  - b. A review of the decision, in which the participant is given the opportunity to present written or oral objections before a person other than the person (or a subordinate of that person) who made or approved the termination decision; and
  - c. Prompt written notice of the final decision to the participant.
3. The subcontractor must afford at least equal protection for the client that DSHS's informal reconsideration and due process hearing procedure affords to the subcontractor.

## **§2.05 TIMELY REIMBURSEMENT OF SUBCONTRACTORS**

### POLICY:

Subcontractors *must* bill each month or submit a statement saying no expenses incurred during the past month by the 15<sup>th</sup> of each month. Any FSRs not received by this day may not be reimbursed until the following month.

Funds will be reimbursed for actual incurred cost only and must be accompanied by appropriate supporting documentation for each request, as determined by BVCOG. The subcontractor should use the budget as a guide for controlling expenditures and thus staying within the cost limits as set forth in the budget.

Expenditures should be planned in order to utilize the funds within the contract period. Low expenditures could lead to deobligation of funds unless adequate documentation is provided to insure that expenditures will be incurred during the contract period.

Monthly billing should include (all information included on monthly Financial Status Report):

- Organization Identification
- Reimbursement address
- Contact person/phone number
- Identification of the funding source(s)
- Billing period
- Amount of payment requested by budget line item
- Calculation of the requested payment
- Total dollar amount of expenditures and remaining fund balance(s)
- Signature of authorized individual

Supporting documentation must also be submitted with the monthly Financial Status Report as well as other required reports such as the Service Category Expenditure Sheets for Ryan White and State Services and the Exhibit A for HOPWA. BVCOG reserves the right to require additional reports as needed to fulfill contractual obligations or to satisfy requirements imposed by DSHS.

PROCEDURE:

1. All reimbursement requests will be logged in by BVCOG staff with the date the request is received.
2. The request will then be reviewed by the Contract Monitor to ensure the contractor has not requested reimbursement for funds exceeding the allocated amount. If the contractor has exceeded the allocation of any service category, the request will be given to the Program Manager who will contact the subcontractor regarding the overage. The subcontractor will be required to resubmit the request.
3. The request will then be submitted to the HIV Program Accountant. The Accountant will review the FSR and tie out the requested amounts with the backup documentation. The Accountant will contact the subcontractors for corrections and re-submission if any discrepancies are found.
4. The Accountant will submit the FSR and accompanying information to the Program Manager noting that the request is ok to pay.
5. The Program Manager will review the request, then complete and sign a check request and submit the request to the Executive Director for signature and submission to the Finance Department for payment.
6. All of the above steps will be completed within 1 week of receipt of the request, unless revisions needed from the subcontractor causes delays. All attempts will be made to complete the above steps and submit the check request for final approval and signature by 5:00 p.m. on Friday in order for checks to be processed the following week.

Any request forms not including the appropriate supporting documents will not be sent to Finance until the outstanding issues are resolved. Subcontractors will be notified of the discrepancy immediately in order to avoid any delays in reimbursements. Checks may be held by BVCOG's Director of Finance if BVCOG is experiencing a low cash flow position and/or BVCOG is waiting for reimbursement from DSHS.

## **§2.06 TECHNICAL ASSISTANCE FOR NONCOMPLIANCE**

### POLICY:

The Brazos Valley Council of Governments will provide technical assistance to all subcontractors who are found to be out of compliance for contract provisions. Technical assistance will be provided by the Administrative Agency (AA) whenever possible to prevent imposing a sanction.

### PROCEDURE:

- A. Identifying the Need for Technical Assistance
  1. BVCOG will conduct informal reviews to ensure compliance on each subcontractor on a monthly basis to ensure compliance with contract requirements, including reporting, fiscal, data, and program requirements.
  2. BVCOG monitoring staff will also conduct desktop and an on-site monitoring visit with each subcontractor on an annual basis to review the program for contract compliance and program performance.
- B. Implementing Technical Assistance
  1. The subcontractor will be notified in writing immediately when they are out of compliance with a contract requirement.
  2. The written notice can be either e-mail or a mailed letter detailing the noncompliance, what action needs to be taken to correct the problem, and a timeline for correcting the problem.
  3. If the problem can be corrected by the subcontractor without assistance, the subcontractor will be required to submit evidence that the problem has been corrected.
  4. If the subcontractor requires additional technical assistance in order to correct the problem, the AA will arrange a meeting, either via conference call or in person, to discuss steps that need to be taken and ways the AA can assist the subcontractor in correcting the problem.
  5. The AA will send the subcontractor written notification of compliance with the requirement once the AA receives sufficient evidence that the problem is corrected.
- C. Imposing Sanctions
  1. BVCOG will impose one or more sanctions, following BVCOG's Sanctions Policy (§2.07), when one of the following occurs:
    - The subcontractor fails to cooperate with the AA or respond to the AA regarding noncompliance with contract requirements.

- The subcontractor fails to respond to adverse findings resulting from a site visit or a complaint filed against the subcontractor.
  - The subcontractor's actions adversely affect the provision of client services.
  - Any other situation in which the AA determines that a finding of noncompliance warrants such action.
2. The decision to impose a sanction depends on the severity of the finding or if similar or recurring problems have been found in the past.
  3. BVCOG will work with the subcontractors as much as possible to avoid the imposition of sanctions.

## **§2.07 SUBCONTRACTOR SANCTIONS FOR CONTRACT NONCOMPLIANCE**

### POLICY:

It is the policy of the Brazos Valley Council of Governments HIV Program to follow the procedure below when a subcontractor is found to be out of compliance with contract terms. BVCOG has various options it may take in regard to contract noncompliance, including emergency action, corrective action or imposition of a sanction. The decision to require corrective action or to impose a sanction depends on the severity of the finding or if similar or recurring problems have been found in the past. In the event that a discrepancy occurs between BVCOG's sanctions policy and the current contract(s) with the subcontractor, the most recently enacted contract will be followed.

### PROCEDURE:

#### **Noncompliance with Contract Terms**

Each subcontractor receiving funds through BVCOG signs a contract which outlines tasks or requirements associated with receiving the funds. In signing the contract, the subcontractor agrees to perform those tasks or requirements. Noncompliance results when a discrepancy is found in the administration of a program or a service or an irregularity is found in the way the subcontractor is spending and/or accounting for the funds. The discrepancy may be found during a compliance review or it may be found by staff responsible for monitoring subcontractor compliance with programmatic or financial accounting activities. The subcontractor may also be found in noncompliance for failing to cooperate with the investigation of a complaint or failing to respond to adverse findings resulting from a complaint filed against the subcontractor.

#### **Emergency Action**

BVCOG is authorized to take an immediate emergency action when a reviewer determines that a finding of noncompliance warrants such action.

#### *Time frame and method for notifying subcontractor of emergency action*

The reviewer, after conferring with appropriate BVCOG management staff, gives a verbal notice on-site to the subcontractor to immediately discontinue the action or process. The reviewer provides written notice of the required emergency action by certified mail within 10 calendar days.

*Time frame for the subcontractor to respond to emergency action*

The subcontractor must immediately discontinue the action or process that has prompted the required emergency action. In addition, the subcontractor must provide an acceptable action plan in a time frame specified by BVCOG to ensure that the circumstances or conditions which caused noncompliance will not recur.

*BVCOG action when the subcontractor fails to respond to the emergency action notice*

BVCOG will decide what additional actions or recourse may be needed in order to effectively stop the noncompliant action or process. Recourse may include the imposition of any of the corrective actions listed in this policy and/or imposition of any of the sanctions described in this policy or any combination thereof.

*Discontinuing emergency action*

Emergency action is discontinued when the condition causing BVCOG to take emergency action has been eliminated and BVCOG is reasonably sure that the condition will not recur. Compliance will be determined by accelerated monitoring or other appropriate BVCOG procedures. BVCOG notifies the subcontractor in writing that the condition which elicited the emergency action(s) has been resolved and additional action is not required.

**Corrective Action**

When possible, BVCOG staff will require the subcontractor to remedy adverse findings by recommending that the subcontractor take certain corrective action(s) before imposing a sanction(s). When corrective action is recommended, the subcontractor is subject to the following BVCOG actions:

- announced or unannounced compliance reviews to determine the cause(s) of noncompliance;
- technical assistance/training to assist the subcontractor in rectifying certain noncompliant areas of service delivery or administration;
- follow-up site visits, and
- accelerated monitoring.

The decision to require corrective action or to impose a sanction depends on the severity of the finding or if similar or recurring problems have been found in the past.

*Time frame and method for notifying the subcontractor of required corrective action*

Within 30 business days of finding subcontractor irregularities BVCOG sends the subcontractor a written notice requiring corrective action to resolve the irregularities. The notice may be part of the site visit report or it may be a letter relating findings from contract monitoring activities. The notice informs the subcontractor of the need to develop an action plan to address the irregularities that were found, the expected time frame for resolving the irregularities and the time frame for responding to the corrective action requirement.

*Time frame for the subcontractor to respond to the corrective action*

The subcontractor has 30 business days from the date of the letter to respond to the corrective action requirement by outlining the action that has been taken or will be taken to address the

findings. BVCOG may shorten this time frame if warranted based on the nature of the non-compliance. A time frame for completing the action plan and how the subcontractor will determine the effectiveness of the action plan should be included.

*BVCOG action when the subcontractor fails to respond to the corrective action notice*

BVCOG will decide whether or not to issue a formal sanction if, by the end of the allotted time period, the subcontractor fails to respond by providing the proposed action plan.

*BVCOG action when the subcontractor responds to the corrective action notice*

BVCOG staff which directed the use of a corrective action reviews the subcontractor's response and evaluates it. Within 30 business days or less from receipt of the plan, the following alternatives are available:

1. When the corrective action is acceptable, BVCOG staff reply in writing acknowledging receipt of the response and that it is accepted.
2. When the corrective action is unacceptable, staff informs the subcontractor in writing that additional action or information is needed. The subcontractor must respond within the timeline. Staff may discuss unacceptable portions of the corrective action plan with the subcontractor over the telephone. Any agreements of changes from those discussions should be documented in the subcontractor's file. BVCOG may decide to impose a formal sanction if the subcontractor fails to negotiate a satisfactory corrective action plan.

*BVCOG action when corrective action fails to resolve noncompliance*

When corrective action has been required and the subcontractor is still not in compliance or will not comply, BVCOG may then decide to impose a sanction. BVCOG will determine what sanction is appropriate based on the severity of the issues.

**Sanctions That May Be Imposed By BVCOG**

A list of possible sanctions is found in the BVCOG contract which both parties sign. One or more sanctions may be imposed depending on the extent of the problem, the impact on the clients being served and/or the seriousness of the problem. For the purposes of this policy, sanctions are shown in three different levels depending on the seriousness of the action to be taken.

*Level I Sanctions*

One or more of the following Level I sanctions may be imposed:

1. accelerated monitoring;
2. requiring the provider to accept technical/management assistance or training;
3. disallowing claims for payment or reimbursement on expenditures and expenditures for which prior approval was required but not obtained;
4. requiring additional, more detailed, programmatic reports;
5. requiring additional prior approvals for expenditure of funds, and/or
6. referral to the DSHS Grants Management Division or Internal Audit for monitoring.

### Imposing the level I sanction

Staff of the program finding noncompliance may impose the level I sanction. Staff should follow program procedures when imposing a level I sanction.

### Time frame for subcontractor sanction notification

BVCOG provides written notice by certified mail to the subcontractor within 30 calendar days of the decision to impose sanctions.

### Content of the sanction notice and method of calculating response time

BVCOG staff issues a written notice to the subcontractor telling the subcontractor that this is the official notice imposing the sanction. **The sanction is effective upon receipt of the notice.** The notice must contain the following:

1. the area(s) found to be in noncompliance;
2. any references to previous correspondence;
3. a narrative outlining what must be done to achieve compliance;
4. the expected time frame for reaching compliance, and
5. the deadline for the subcontractor to reply.

The time frame for the subcontractor's response begins with the receipt date on the return receipt or the date delivery was attempted whichever comes first. That date is considered day zero.

NOTE: When accelerated monitoring is one of the sanctions, a notice is not required to be sent prior to performing the monitoring.

### Subcontractor action in response to a notice of sanction

The subcontractor has 30 business days from the date the sanction notice is received or by the timeline given in the letter to respond in writing to the findings. The written response is sent to the person imposing the sanction and must include the following:

- acknowledgment of receiving the notice;
- a narrative explaining how the area(s) of noncompliance will be corrected, and
- specific time frames for achieving compliance.

The subcontractor may also ask for reasonable technical/management assistance or training to correct the area of noncompliance. The division or program will decide if the request is reasonable and within the capability of BVCOG to provide the requested assistance.

### BVCOG action when the subcontractor fails to respond to the Level I sanction notice

BVCOG will decide whether or not to issue additional sanctions if, by the end of the timeline given, the subcontractor fails to respond by providing the proposed action plan.

### Action required of BVCOG when a subcontractor responds to the sanction

The BVCOG program which imposed the sanction evaluates the response to determine if the actions to be taken are appropriate and acceptable. The following alternatives are available:

- When the response is acceptable, the program acknowledges receipt of the response in writing and informs the subcontractor that it is accepted.
- When the response is unacceptable, BVCOG may negotiate with the subcontractor to agree on an acceptable response or impose additional sanctions.

All decisions and agreements are reduced to writing and sent to the subcontractor for authorized approval signatures.

#### Lifting the sanction

A sanction is lifted when the area(s) of noncompliance has been brought into compliance. Compliance may be determined by monitoring through normal BVCOG procedures. BVCOG notifies the subcontractor in writing that the sanction is lifted.

Should a contract with a subcontractor expire, the sanction remains active until the subcontractor has, if necessary, made restitution or has been prosecuted. In addition, according to the contracts signed by BVCOG and its subcontractors, BVCOG may delay contract execution with a subcontractor while proposed or actual sanctions are pending resolution. BVCOG will determine what action, if any, will be taken on the new contract. All correspondence, notices and other pertinent documentation about the sanction become a permanent part of the subcontractor's file.

#### *Level II Sanctions*

The following are the Level II sanctions which may be imposed by BVCOG:

1. Probation for a time period specified by BVCOG
2. Temporarily withholding a portion of funds
3. Other actions BVCOG deems to be appropriate

#### Time frame for the subcontractor sanction notification

BVCOG provides written sanction notice by certified mail to the subcontractor within 30 calendar days of finding noncompliance.

#### Content of the sanction notice and method of calculating response time

BVCOG staff issue a written notice to the subcontractor telling the subcontractor that this is the official notice imposing the sanction. **The sanction is effective upon receipt of the notice.** The notice must contain the following:

1. the area(s) found to be in noncompliance;
2. any references to previous correspondence;
3. a narrative outlining what must be done to achieve compliance;
4. the expected time frame for reaching compliance, and
5. the deadline for the subcontractor to reply.

The time frame for the subcontractor's response begins with the receipt date on the return receipt or the date delivery was attempted whichever comes first. The date of receipt or attempted delivery is considered day zero.

NOTE: When accelerated monitoring is one of the sanctions or is used as a method of determining compliance, a notice may not be sent prior to performing the monitoring.

### Subcontractor action in response to a notice of sanction

The subcontractor has 30 business days from the date the sanction notice is received or the timeline given in the letter to respond in writing to the findings. The written response is sent to the person imposing the sanction and must include the following:

1. acknowledgment of receiving the notice;
2. a narrative telling how the area(s) of noncompliance will be corrected, and
3. specific time frames for achieving compliance.

The subcontractor may also ask for reasonable technical/management assistance or training to correct the area of noncompliance. BVCOG will decide if the request is reasonable and within the capability of BVCOG to provide the requested assistance.

### BVCOG action when the subcontractor fails to respond to the Level II sanction notice

BVCOG will decide whether or not to issue an additional sanction if, by the end of 30 business days or the timeline given, the subcontractor fails to respond by providing the proposed action plan.

### Action required of BVCOG when a subcontractor responds to the sanction

1. When the response is acceptable, BVCOG acknowledges receipt of the response in writing and informs the subcontractor that it is accepted.
2. When the response is unacceptable, BVCOG may negotiate with the subcontractor to agree on an acceptable response or may impose additional sanctions.

All decisions and agreements are reduced to writing and sent to the subcontractor for authorized approval signatures.

### Lifting the sanction

A sanction is lifted when the area(s) of noncompliance has been brought into compliance. Compliance may be determined by monitoring through normal BVCOG procedures. BVCOG notifies the subcontractor in writing that the sanction is lifted.

When the contract with a subcontractor expires, the sanction remains active until the subcontractor has, if necessary, made restitution or has been prosecuted. In addition, BVCOG may delay contract execution with a subcontractor while proposed or actual sanctions are pending resolution. BVCOG will determine what action, if any, will be taken on the new contract.

All correspondence, notices and other pertinent documentation about the sanction become a permanent part of the BVCOG subcontractor's file.

### *Level III Sanctions and Final Notice of Permanently Withholding Cash Payments*

One or more of the following Level III sanctions may be imposed:

1. Termination of all or part of the contract.
2. Suspension of all or part of the contract.
3. Denial of contract renewal or future contract awards for a period not to exceed five years.

4. Reduction of contract funding amounts if the subcontractor is not:
  - (a) achieving or maintaining the proposed level of service, or
  - (b) spending funds appropriately and at a rate which will make full use of the award, or
  - (c) providing services as set out in the contract.
5. Contract amendments resulting from noncompliance.

In addition to these sanctions, this process also applies to a final notice of permanently withholding cash payments.

#### Time frame for subcontractor sanction notification

BVCOG provides written notice by certified mail to the subcontractor within 30 calendar days of finding noncompliance.

#### Content of the sanction notice and method of calculating response time

BVCOG staff issue a written notice to the subcontractor telling the subcontractor that this is the official notice imposing the sanction, or that this is the final notice of permanently withholding cash payments. **The sanction or the permanent withholding of cash payments is effective upon receipt of the notice.** The notice must contain the following:

1. the area(s) found to be in noncompliance;
2. any references to previous correspondence;
3. a narrative outlining what must be done to achieve compliance;
4. the expected time frame for reaching compliance, and
5. the deadline for the subcontractor to reply.

The time frame for the subcontractor's response begins with the receipt date on the return receipt or the date delivery was attempted, whichever comes first. The receipt date or the attempted delivery date is considered day zero.

#### Subcontractor response to Level III sanction(s) or final notice of permanently withholding cash payments (25 TAC § 1.51-1.55)

When the subcontractor wishes to protest the Level III sanction or final notice, a response requesting a due process hearing must be sent to BVCOG within 20 calendar days of receiving the sanction notice or final notice of permanently withholding cash payments. The response is addressed to the person who sent the notice and must be mailed or hand delivered.

The subcontractor may also include the following:

1. a copy of the notification letter from BVCOG;
2. a written summary outlining the grounds upon which the subcontractor bases the request;
3. a written description of the issue or issues to be resolved;
4. a written statement of the relevant facts;
5. documentation in support of the subcontractor's position, and
6. a statement and listing of authorities who support the subcontractor's position.

#### BVCOG action when the subcontractor fails to respond

After the 20 calendar days have elapsed, BVCOG sends a certified letter notifying the subcontractor that the sanction is being enforced immediately.

## **§2.08 SUBCONTRACTING HIV HEALTH AND SUPPORT SERVICES**

### POLICY:

BVCOG develops the RFP for HIV services according to DSHS requirements. BVCOG may request assistance or consultation from DSHS in developing the RFP.

### PROCEDURE:

#### I. RFP PROCESS

##### A. Methods of notifying providers regarding the RFP

Written notice will be published in at least one widely distributed newspaper within the county or counties in which the majority of the clients who are served with the funds reside. BVCOG determines the content of each notice. The notice will include, but is not limited to, the following items:

- A description of eligible applicants
- Required services
- Deadline dates
- Notice of applicant meeting dates
- Contact point for the application/instructions
- The source of funding

BVCOG may request a waiver of newspaper publication requirement from the State and use an alternative means of notification. A request for a waiver must include documentation supporting the reason a waiver from newspaper publication is needed. The following circumstances are examples for justification to use an alternative means of notification.

- The number of responding bidders has historically been very small
- The size of the service area and the services available make newspaper publication impractical
- An alternative method of notification has proven to be at least as effective

When a waiver is granted, BVCOG will retain documentation of the alternative methods of notification. Two or more of the following methods of notification must be used when a waiver has been granted.

- Public service announcements on radio and television
- Mail-outs to service providers, organizations appearing on bidders list, local chamber of commerce list, and past applicants.
- Phone calls
- Facsimile transmissions

- Posters and /or fliers

## B. Contract solicitation methods

A competitive RFP is an open competition in which anyone who meets the qualifications for the RFP may submit a proposal. In most cases, multiple proposals requesting funding considerations for particular service categories will be submitted. The proposals are then evaluated by an external review committee selected by BVCOG. The external review committee will review and evaluate all proposals and submit them to BVCOG for review and final funding decision.

A sole source RFP is an unusual situation in which a noncompetitive proposal is solicited due to one of the following circumstances:

- The requested services are only available from one source,
- An emergency need for the services will not permit the delay associated with the competitive solicitation,
- Having sought a number of sources, competition is determined to be inadequate.

A single source RFP is a noncompetitive RFP that is adequately justified with restricted qualifications. The item(s) or service(s) are so specifically and narrowly defined that item(s) or services(s) could only be procured from a single source.

Justification must be documented and approved in advance by the State for sole source and single source contracts.

## C. Letter of Intent

The RFP will request that any organization considering applying for these funds submit a letter of intent and will give a due date. The letter of intent will not be required to submit a proposal, but will be strongly encouraged in order to assist BVCOG in preparing for the review process.

## D. Request for proposal content

The RFP contents must include the selection criteria tool that will be used to evaluate and score proposals. It must contain the following information, depending on the type of the potential provider:

- For eight-category budget providers, the following information must be included in the proposal to provide services:
  - background of the agency,
  - program objectives,
  - experience delivering the services to the targeted populations,
  - budget,
  - other funding awarded or pending for similar HIV projects,
  - letters indicating interagency collaboration,
  - community outreach to target audience,

- project evaluation,
- quality management system description,
- assurances of licensure or certification (if applicable),
- assurances of audit and other internal controls for funds, and
- all other assurances required of the primary contract with the State.

The RFP may also stipulate that potential bidders should provide information about any special considerations that apply to the category for which the proposal is submitted.

- For fee-for-service providers (e.g., an individual doctor, dentist, therapist, nutritionist, or home health agency), service units are reimbursable at a predetermined rate per unit that includes all associated costs relevant to the delivery of that service. To encourage participation of fee-for-service providers, BVCOG must ask for a detailed resume to include valid state licensure (if applicable) and background experience. The RFP may allow fee-for-service providers to submit a proposal that does not contain information that may be expected of an eight-category budget provider (e.g., community outreach, project evaluation, agency background, etc).

BVCOG must conduct meetings/workshops to provide assistance to potential applicants in the application process. Meetings/workshops will be announced and scheduled in advance of the proposal submission deadline. Announcements regarding the meetings/workshops and other pertinent information should be sufficiently broadcast to ensure all potential applicants receive the notice in a timely manner. Samples and examples of all information requested in the RFP should be provided.

## II. EXTERNAL REVIEW COMMITTEE

### A. Purpose

BVCOG is responsible for ensuring the external review process meets the standards set forth in this section. All actions related to external review committee processes must be documented.

The purpose of the external review committee is to fairly and equitably evaluate proposals submitted as a result of the RFP using a selection criteria tool developed by BVCOG. The selection criteria tool must be included in the RFP. When two or more agencies are to be funded to deliver the same service, BVCOG decides funding amounts based on an objective and equitable process.

### B. Membership

BVCOG selects the members of the external review committee. BVCOG will set up the external review committee to provide a balance of service expertise and those infected and affected by the HIV epidemic. Others to be included may be persons who have professional expertise in providing the services to be offered. A balanced membership shall be achieved by using the following guidelines:

- Appoint no fewer than three members
- Decide on the maximum membership
- Include at least one person living with HIV infection
- Reflect the epidemic profile as closely as possible
- Include an experienced health care professional when reviewing ambulatory care or case management issues
- Consider including business professionals
- Select the remaining membership from traditionally under-represented populations, including but not limited to: persons living with HIV, people of color, women, teenagers at risk, mental health/social workers, family members, and other individuals who are representative of the HIV epidemic in the service area.

When unable to achieve this balance, BVCOG will document how it attempted to meet these requirements and submit to the State documentation for review prior to convening the external review committee.

### C. Process

BVCOG develops the selection criteria tool used to evaluate proposals that have been submitted in response to the RFP. The tool must not discriminate against any class of provider and should be included in the RFP. The criteria should include, but is not limited to the following:

- Fiscal management (e.g., qualified financial management staff, accounting system which allows for funds tracking by source, board-adopted financial management procedures, incorporation as a legal business entity, etc.)
- Administrative management (e.g., well-defined, measurable goals and objectives; client grievance policies; clear and easily understood evaluation methods quality management systems; relevance to the Planning Council's priorities, etc.)
- Service capabilities (e.g., access to target population, service delivery experience in HIV/AIDS or in providing services to similar populations, qualified staff, adequate facilities to deliver the services covered under the funding, history of cooperation and collaboration with other service providers, ability to meet national, state, and/or community level standards of care, service and quality, etc.)
- Other areas deemed appropriate to ensure that selected providers will deliver quality services to those in need.

### D. Conflict of Interest

Potential members of the external review committee who serve as a director, trustee, salaried employee, volunteer, or who otherwise materially benefit from association with any agency that currently receives funds, or may see, funds being considered by BVCOG are considered to have a conflict of interest. This conflict of interest must be declared and membership on the external review committee must be declined.

A committee member who is aware of a conflict of interest on the part of another member, who does not declare the conflict, must report the conflict to the committee as a whole. The committee must disqualify the member with the conflict and dismiss the member for failure to declare the conflict of interest.

### III. SUBCONTRACTOR INFORMATION

Subcontractors must submit the following to BVCOG as required by BVCOG's RFP or renewal application.

- Subcontractor Data Sheet(s)
- Detailed budget information, and
- Other documentation as requested by BVCOG for all providers.

### IV. DOCUMENTATION

BVCOG must maintain all documentation supporting the selection process described in this policy as specified in the General Provisions for DSHS Contracts. The documentation must be kept on file and available for inspection by state or federal officials upon request. The required documentation includes the following information:

- Announcements published in area newspapers or other media,
- Copies of RFPs and requests for renewal applications, formats for competitive proposals and documentation for sole source and single source proposals and awards,
- Documentation of the criteria selection tool used to review and score proposals,
- Copies of scoring sheets, minutes of meetings in which determination of funding recommendations were discussed, and resulting scores,
- Lists of the external review committee membership, including a brief description of each member and their expertise which justified their participation, and
- All waivers that have been requested.

### V. PROCESS OF AWARD NOTIFICATION

BVCOG will notify awarded agencies of funding decisions in writing as soon as the decisions have been made. Awards will also be posted on BVCOG's HIV program website at <http://hiv.bvcog.org>. No other information about the decision process will be released, although applicants may request in writing to be provided with a summary of the reviewers' comments. This information will be included in the RFP guidance document.

### VI. GRIEVANCES

Grievances concerning funding decisions must be submitted in writing to the administrative agency no later than the close of business three working days after the announcement of award. BVCOG has a policy and procedure for reviewing and responding to a grievance that may be

filed as a result of this process. The grievance policy/procedure is available upon request. The result of the grievance process may be appealed to DSHS for final resolution.

## **§ 2.09 PROCESS FOR REALLOCATION AND REDISTRIBUTION OF FUNDS**

### POLICY:

The Brazos Valley Council of Governments has established elements for a process for reallocations. This process must be complied with for all reallocations. Reallocations may be requested by the subcontractor or initiated by BVCOG at any time based on a determination of client need. Subcontractors may request a reallocation if the subcontractor realizes a change in client needs or service utilization, and another funding source is not available to meet the need.

The Brazos Valley Council of Governments is charged with allocating funds to service categories based on client needs for each HSDA, as well as reallocating funds as necessary. Subcontractors are required to conform to the allocations that were approved by BVCOG and DSHS. Funds may not be moved between service categories without prior approval through the reallocation process and BVCOG cannot reimburse subcontractors for expenses over 100% of what is allocated to each service category.

### PROCEDURE:

1. Subcontractors requesting a reallocation of Ryan White Part B Service Delivery or HIV Health & Social Services (State Services) funds must follow this procedure, which includes a sequence of steps designed for the efficient processing of re-allocation requests:
  - a. The subcontractor must complete and submit to BVCOG a re-allocation request on the BVCOG re-allocation request form. This form should include adequate justification and be submitted via email to the BVCOG Planner ([chamilton@bvcog.org](mailto:chamilton@bvcog.org)) or by fax (979-595-2815). Requests for reallocations of Ryan White Title II or State Services funds must be submitted no later than 45 calendar days before the end of the contract period. This limitation may be suspended at the discretion of BVCOG in the case of extenuating circumstances such as a demonstration of extreme need, emergency situations, or other events. In the event of such a situation, the subcontractor should submit the reallocation request as per the procedure defined in this policy. All dollar amounts on the reallocation request form must be stated as the overall service category allocation, in other words, administrative costs should not be subtracted when entering the amounts for “current allocation,” “requested change,” and “requested allocation.”
  - b. Subcontractors of BVCOG may not submit more than one reallocation request per contract in any 90 calendar day period. This limitation may be suspended at the discretion of BVCOG in the case of extenuating circumstances such as a demonstration of extreme need, emergency situations, or other events. In the event of such a situation, the subcontractor should submit the reallocation request as per the procedure defined in this policy.
  - c. Immediately upon receiving the request, the Planner will log and forward the request to the Program Manager, Contract Monitor, and Data Manager.

- d. Within 3 business days of receiving the request, the Program Manager, Contract Monitor, Planner, and Data Manager will meet to discuss the request. The request will be reviewed using current utilization and expenditure data, most recent quarterly report, needs assessment, service category priorities, and other sources of data as appropriate. Approval of the request will be determined by the following factors: (1) all required forms are correct and complete, (2) the request is fully explained and justified, (3) all factors were taken into consideration, including other sources of funding and utilizing funds as payer of last resort.
  - e. The subcontractor will be contacted via phone or email immediately following this meeting and advised of any revisions that must be made to the re-allocation request or questions needing clarification by the subcontractor.
  - f. If revisions or additional information are required, the subcontractor will be required to provide the requested information to BVCOG via email within 3 business days. The Program Manager, Contract Monitor, Data Manager, and Planner will meet again to review the revised request within 3 business days of receipt of revisions or additional information.
2. If a re-allocation request is initiated by BVCOG based on an identified need, the following procedure will be followed:
    - a. BVCOG will discuss the re-allocation with the affected subcontractor(s).
    - b. BVCOG will compile any documents and data necessary for review.
    - c. The Planner will send the reallocation documentation to the subcontractor and schedule a meeting with the subcontractor to discuss the re-allocation.
  3. Within 2 business days of final approval, the subcontractor(s) will receive notification from the Planner and will be required to submit a revised Table 1 and, if applicable, a contract amendment request.
  4. Within 5 business days of receiving the final revision of the Table 1 and contract amendment request, BVCOG will revise and forward the appropriate documents to the agency. The BVCOG Planner will also notify all AA staff of the change so files may be updated.
  5. If the subcontractor's request for re-allocation is not approved at any of the levels listed above, the subcontractor will be notified in writing of the denial, as well as a reason for the denial and any further action requested by BVCOG regarding revisions or resubmission of the request.
  6. In the event one of the above timelines cannot be met due to unforeseen circumstances, BVCOG will notify all affected parties of the delay and will present a revised timeline for complete resolution of the re-allocation request. If a subcontractor is unable to meet any of the above deadlines, the requesting subcontractor must contact BVCOG staff prior to the deadline to arrange a new timeline for completion.
  7. If any of the above requirements and deadlines are not met, the reallocation request will be denied and the subcontractor must wait 90 calendar days before resubmitting.

## **§ 2.10 PAYOR OF LAST RESORT**

### POLICY:

HIV Subcontractors receiving Ryan White or State Services funds through Brazos Valley Council of Governments must bill third party payors before charging services to Ryan White and State Services funds for all core medical care services. HIV Subcontractors funded for Outpatient/Ambulatory Medical Care, whether a medical care or non-medical provider, must also charge clients a fee for ambulatory outpatient medical care visits for clients without a third party payor. The above activities must be conducted in accordance with Texas Department of State Health Services' Payor of Last Resort policy, number HIV/STD 590.001. Subcontractors who cannot meet certain provisions of the DSHS Payor of Last Resort policy must apply for a waiver. BVCOG will monitor all subcontractors for compliance with this policy.

### PROCEDURE:

1. Subcontractors receiving Ryan White or State Services funds through BVCOG for core medical services must develop and implement policies and procedures that are in line with DSHS policy 590.001.
2. Policies regarding payor of last resort and client fees must be submitted to and approved by BVCOG prior to implementation.
3. BVCOG will monitor all subcontractors for compliance with DSHS policy and subcontractor policies regarding payor of last resort and collection of client fees.
4. Subcontractors submitting a waiver must do so in accordance with policy 590.001. Waivers must be submitted to BVCOG for approval.
5. If a waiver is approved by BVCOG it will then go to DSHS for final approval.
6. BVCOG will promptly notify subcontractors when a waiver is approved or denied, in addition to any further instructions or requirements.
7. BVCOG will monitor subcontractors who have been approved for a waiver to ensure a current waiver is in place.

## **§ 2.11 SETTING RESTRICTIONS ON CLIENT SERVICES OR PAYMENT AMOUNTS**

### POLICY:

Ryan White Part B, State Services, and Housing Opportunities for Persons with AIDS (HOPWA) Subcontractors of the Brazos Valley Council of Governments must get prior approval from BVCOG before setting restrictions or caps on any client services funded by BVCOG. Subcontractors wishing to impose a restriction or cap beyond state or federal requirements, either on the service provided by the agency or the amount of financial assistance provided, must submit a request and justification to BVCOG for approval. BVCOG and HIV subcontractors will make a good faith effort to ensure clients have access to needed services and that services or funds are not restricted beyond state or federal requirements when possible.

PROCEDURE:

1. Subcontractors must ensure they are maximizing Ryan White, State Services, and HOPWA funds by strictly adhering to DSHS' Payor of Last Resort policy and utilizing all other community resources whenever possible prior to requesting a restriction on client services or funds. Subcontractors must closely monitor expenditures so action is taken before a lapse in funds occurs. Subcontractors should also work with BVCOG to determine whether a relocation or redistribution is possible before restricting services.
2. If, after the above steps are exhausted, a subcontractor determines that client need outweighs the resources and funds available, and setting a cap/restriction on funds is necessary, a request and justification must be submitted to BVCOG, along with a proposed policy for the restriction. Subcontractors are encouraged to work with BVCOG on developing the proposed policy.
3. The request and justification must include the following information:
  - the primary category name
  - secondary category name(s)
  - all funding sources contributing to provision of this service
  - other resources/community agencies utilized
  - the reason for the cap/restriction
  - how the restriction will be determined, including more restrictive eligibility criteria, and the reason for that method of restriction
  - the projected result of implementing the restriction (e.g., how this will help you achieve your goals; how it will impact the agency financially)
  - how this change will affect client outcomes and performance measures.

The proposed draft policy must be attached. BVCOG may request additional information or documentation as needed to assist in making the decision.

4. Subcontractors may use a variety of methods for imposing the restriction, including, but not limited to, more restrictive eligibility criteria, the number of times in a given timeframe the client can receive the service, limits on the amount of financial assistance provided, or various levels of assistance based on some criteria (e.g., X amount of assistance for clients at or below 200% FPL, Y amount of assistance for clients at or below 300% FPL, etc.).
5. Subcontractors may use one or more of the following criteria for imposing restrictions on services or financial assistance (this is not a comprehensive list and the subcontractor may propose criteria not included below; some of the criteria below may not be appropriate for all funded services):
  - Income level (e.g., at or below 300% FPL)
  - Number of dependents
  - Disease stage
  - Severity of need

6. Regardless of the method and criteria used, the agency must implement the restriction consistently and fairly with all clients. If the agency has a method for approving assistance outside the restriction (e.g., in emergency situations), the process must be clearly defined in the agency's policy and documented in client charts. The agency must also have a process in place (included in the policy) for objectively evaluating the criteria used for determining the client's eligibility for a service and should put processes in place to avoid subjectivity or perceived bias (e.g., approval by a supervisor).
7. Once the request is submitted, BVCOG HIV program staff will meet to review the request and justification. Staff will also review patterns in expenditure and utilization data, quarterly reports, relevant information from the most recent site visit report, and other information as needed.
8. Once the decision is made, BVCOG will contact the subcontractor with any further instructions, as necessary.
9. Once the policy is in place, agencies must make the policy available to all clients. BVCOG will request evidence that clients were made aware of the policy during subsequent site visits. Whenever possible, subcontractors should make every effort to provide clients with advanced notice of restrictions on services.
10. The subcontractor must closely track the progress of the service and continually re-evaluate the need for the restriction (at least quarterly). If the subcontractor finds it necessary to tighten the restriction, this process must be repeated. The subcontractor must ease or remove the restriction as soon as it is possible to do so. In this instance, the subcontractor must notify BVCOG of the change and submit the revised policy. Clients must be notified of any change in the policy immediately after the policy is finalized or the change is implemented, whichever occurs first.

## **Section 3: Monitoring Policies**

### **§3.01 FAIR MONITORING OF SUBCONTRACTORS**

**POLICY:**

All subcontractors providing HIV client services funded by the Brazos Valley Council of Governments are to be treated equitably. A Priority Assessment Tool (PAT), specific to the Scope of Work, will be completed for all subcontractors following each compliance site visit in conjunction with the development of the Site Visit Report. The resulting rating is an assessment of the contractor to provide guidance in determining when future site visits are to be conducted.

**PROCEDURE:**

1. A PAT will be completed for each BVCOG subcontractor following each site visit in conjunction with the development of the Site Visit Report.
2. The PAT cover page contains comprehensive contract information and is completed for each contract reviewed during the site visit.
3. The Priority Assessment Tool (PAT), specific to the Scope of Work, is the second and third page of the PAT. These pages are to be completed for each contract reviewed. This information should be completed based upon the most current site visit, the resulting site visit report, and any other appropriate documentation, as necessary. The tool may be used for more than one Scope of Work only if the review conducted during the same site visit results in identical findings.
4. The PAT will be scored by tallying the number of yes and no answers. The resulting rating is an assessment of the subcontractor to provide guidance in determining when future site visits are to be conducted.
5. A priority rating of I, II or III will be assigned based on the score. The subcontractor may be imposed with a sanction if determined necessary by BVCOG.
6. The Contract Monitor will use the completed instrument to determine the date of the next site visit, according to the priority rating and sanction levels of each contract attachment.
7. The PAT rating becomes effective on the date of the site visit letter from BVCOG that accompanies the completed site visit report.

### **§3.02 MONITORING OF NEWLY FUNDED SUBCONTRACTORS**

**POLICY:**

Due to the complexity of each funding source's compliance requirements, all newly funded subcontractors will receive additional guidance in the form of an Orientation Site Visit and an Initial Site Visit. The Brazos Valley Council of Governments reserves the right to conduct additional site visits as necessary.

**PROCEDURE:**

A. Pre-Award Site Visit

1. At least 2 months prior to the initiation of the contract (when possible), and prior to final approval of the agency, BVCOG will conduct a Pre-Award Site Visit.
2. The purpose of this visit is to determine the agency's capacity for meeting the contractual requirements and minimum standards for service providers.
3. The agency will be sent all of the monitoring tools in advance of the visit, 30 calendar days prior to the visit if time permits, including programmatic, fiscal, and data tools, as well as clinical tools if applicable.
4. The review will be consistent with the regular monitoring BVCOG conducts on its subcontractors. Anything that the potential subcontractor does not have in place, they must either develop according to the timelines set by BVCOG or they must demonstrate their capacity to meet the requirement.
5. The site visit will be followed by a site visit report to be completed as soon as possible, but no later than 30 business days, after the visit. The report will include timelines that the potential subcontractor must adhere to in order to receive a contract.
6. If deadlines are not met by the agency or documentation provided is inadequate, BVCOG may deny implementation of a contract with the agency. BVCOG may also deny contract initiation with the agency if the Pre-Award Site Visit causes BVCOG to conclude that the agency does not have sufficient capacity to meet the contractual obligations or meet minimum standards.
7. BVCOG will work with the agency as much as possible to assist them in understanding the requirements of the contract and site visit report. BVCOG will provide trainings when possible and as needed by the agency to meet requirements.

B. Orientation Site Visit

1. Within three (3) months of the date that a subcontractor commences services, the Contract Monitor *may* schedule an Orientation Site Visit with the subcontractor. The Orientation Site Visit may not be conducted if BVCOG determines that all of the items to be reviewed and the information needed by the subcontractor were covered during the Pre-Award Site Visit.
2. This site visit is an opportunity for the Administrative Agency staff to make introductions with the subcontractor and give an overview of the roles and responsibilities of the Administrative Agency and the subcontractor. Administrative Agency staff will review the policies, monitoring tools, data requirements and other contract issues. This will also give the Planner an opportunity to introduce the planning process and to answer questions.
3. At a minimum, the Orientation Site Visit will consist of a review of the monitoring tools, a review of the subcontractor's Administrative and Programmatic Policy and Procedure manuals, a review of personnel files, a review of any service specific standards of care, and a review of client files. The Accountant's visit will consist of, but is not limited to, reviewing the subcontractor's fiscal policies and financial records, as well as providing additional technical assistance as needed. The Data Manager will also look at data security requirements.
4. In addition, the Contract Monitor will verify that the subcontractor's client satisfaction process is in place.

5. Any recommendations for improvements and any required actions will be documented in a letter to the subcontractor. The subcontractor is responsible for addressing those recommendations prior to the Initial Site Visit. Failure to address the recommendations could result in sanctions including, but not limited to, disallowed expenses for that time period.

C. Initial Site Visit

1. Within the initial contract year, the Contract Monitor will schedule an Initial Site Visit.
2. This site visit is an opportunity to evaluate the implementation of compliance guidelines and recommendations from the Orientation Site Visit. Failure to address the required actions from the Orientation Site Visit could result in sanctions for that time period.
3. The Initial Site Visit will be a full review using all current monitoring tools including data and fiscal tools.
4. When possible, the Accountant will conduct a Financial Site Visit at this time. It will include, but is not limited to, verification of timesheets/units of service and analysis of the expense reports against the general ledger.
5. Any findings and recommendations will be documented in a Site Visit Report to the agency.
6. Any findings will need to be addressed in a formal Plan of Corrections in accordance with the Plan of Correction policy.
7. Following the Initial Site Visit, each BVCOG subcontractor will be monitored according to their PAT rating and BVCOG monitoring policies.

### **§3.03 ANNUAL SITE VISITS**

POLICY:

All subcontractors providing HIV client services funded by the Brazos Valley Council of Governments (BVCOG) shall receive one pre-arranged site visit, to include a review of compliance with financial, programmatic, data management and clinical/case management requirements, within the timeframe required based on the most recent Priority Assessment Tool rating, or no less than once every 18 months. Additional site visits may be conducted as needed. A formal written report on the site findings shall be provided to the subcontractor by BVCOG within 30 business days of the completion of the site visit. Subcontractors have 30 business days in which to respond in writing to findings unless another timeline is given as a part of the site visit report. BVCOG retains the right to make unscheduled site visits at any time when the need is indicated by specific circumstances.

PROCEDURE:

A. Monitoring Process

1. Brazos Valley Council of Governments staff will contact appropriate subcontractor staff to negotiate a scheduled date for the visit.

2. Written notification of the site visit will be sent to agency staff 30 calendar days prior to visit. A copy of the monitoring tools to be used will be mailed to the appropriate subcontractor staff 30 calendar days prior to visit. Monitoring staff will identify the staff to be present and activities planned. The subcontractor will be contacted the week prior to the site visit to confirm date and time of the visit.
3. Subcontractors must submit copies of policies requested in each tool to BVCOG at least 7 calendar days before the scheduled visit. The Accountant will also send a tool to the subcontractor, who will return the required documents within the timeframe requested.
4. Monitors will conduct desktop audits of the subcontractor prior to the on-site review. The desktop audit may include, but is not limited to, a review of timeliness of reports submitted by the subcontractor, a review of agency/program policies and procedures, and a review of information in the ARIES system regarding case management and client care.
5. Monitoring staff at the Brazos Valley Council of Governments includes the Contract Monitor (programmatic monitoring), the Data Manager (ARIES monitoring), the Clinical Monitor (clinical and case management monitoring), and the HIV Program Accountant (fiscal monitoring). The Program Manager and other staff may accompany other monitoring staff on site visits as necessary.
6. Employee or client interviews can be scheduled at BVCOG's discretion as needed to assist BVCOG in determining agency compliance and effectiveness of service delivery. The Monitor will send a letter to the Contractor at least 3 weeks prior to the site visit including instructions and a letter to be sent to clients. Client surveys will be conducted in accordance with BVCOG's policy on collecting client satisfaction information (policy #2.03).
7. Monitoring staff will arrive at the designated subcontractor site visit at the agreed upon date and time with all proper materials for conducting the site visit (site visit evaluation instrument, copy of appropriate sections of contract, schedule of subcontractor submission dates for required reports, etc.).
8. A verbal entrance conference will be conducted which will include introductions and an overview/outline of the site visit.
9. Monitoring staff will conduct an evaluation of the subcontractor using the most current evaluation instruments.
10. A verbal exit conference will be conducted with appropriate subcontractor staff summarizing initial findings and recommendations.
11. Monitoring staff will complete a formal written report of the site visit identifying specific recommendations and findings and send the report to the subcontractor within 30 business days of completion of the site visit, notifying subcontractor of the requirement that they respond to all findings in writing within 30 business days or in the timeframe indicated by BVCOG.
12. BVCOG staff will evaluate the subcontractor written response and notify the subcontractor in writing of any inadequate responses. Staff shall notify the subcontractor in writing when all findings are properly resolved to close out the site visit and include the PAT.

13. The Contract Monitor will review the subcontractor response and take further actions if the response is not received within the required timeframe, findings are not resolved in a timely manner or the subcontractor is otherwise noncompliant.

## B. Required Elements of a Site Visit

The elements below are minimum required items to be reviewed on a full site visit. Some of the items may not be applicable for follow-up site visits which usually have a more narrow focus.

### 1. Programmatic Site Visit

#### a. Desktop Review

- 1) Review Quarterly Reports to see agency progress on Performance Measures.
- 2) Review Log of when reports were submitted.
- 3) Review of Policies submitted by the agency prior to visit.
- 4) Completion of tools to the extent possible.

#### b. On-Site Review

- 1) Review client files for appropriate documents, referrals and follow up on stated issues.
- 2) Look for evidence of agency policies being followed
- 3) Complete monitoring tools, including service-specific tools, the core site review tool, personnel file review tool, client file review tools, and the HOPWA tool, if applicable
- 4) Interview staff, when necessary

### 2. Fiscal Site Visit

#### a. Desktop Review

- 1) Examine contracts, related correspondence, requests for reimbursements, budget revisions and other appropriate documents.
- 2) Examine chart of accounts and General Ledger for the chosen quarter.
- 3) Check to ensure expenditures are allowed.
- 4) Test several employees in a pay period for correct calculations.
- 5) Ensure that no overtime was charged to the program.

#### b. On-Site Review

- 1) General – review reports, examine personnel policies and job descriptions, examine IRS tax exemption certification, and examine Board minutes,
- 2) Accounting Structure
- 3) General Ledger
- 4) Cash Disbursements (CD) Journal
- 5) Cash Receipts (CR) Journal
- 6) Personnel
- 7) Fringe Benefits
- 8) Travel
- 9) Equipment
- 10) Supplies
- 11) Contractual
- 12) Other Costs

- 13) Indirect Cost
  - 14) Program Income (PI)
  - 15) Program Compliance
3. Data Monitoring
    - a. Desktop Review
      - 1) Check for missing and unknown data, as well as obviously inaccurate entries
      - 2) Conduct a review of CARE-HIPP
      - 3) Policy review
    - b. On-Site Review
      - 1) Client file review to check for backup documentation and consistency with ARIES data entry
      - 2) Security requirements check
  4. Clinical and Case Management Monitoring
    - a. Desktop Review
      - 1) Agency policies
      - 2) Complete tools to the extent possible based on the policies.
    - b. On-Site Review
      - 1) Verification of required licensure for clinical, clinical case management and/or psychosocial case management service providers.
      - 2) Verification of education for clinical, clinical case management and/or psychosocial case management service providers.
      - 3) Verification that the agency has a written process for delivering, adhering to and maintaining written clinical and/or case management protocols, policies and procedures.
      - 4) Verification that the agency has a written process for developing, adhering to, and maintaining written Physician Standing Delegation Orders, where required by law to provide the clinical services and that the orders are updated at least annually.
      - 5) Verification that the agency utilizes Standards for Clinical/Case Management Services when conducting periodic monitoring of their subcontractors.
      - 6) Verification that the agency has a written process to ensure that their subcontractors have verified the certification, licensure, credentials, etc for the appropriate staff and that these are verified at least annually.
      - 7) Verification that the agency has a policy/procedure to have a written process in place for how the agency determines, documents, and reports suspected instances of sexual child abuse in accordance with Chapter 261 of the Texas Family Code.
      - 8) Verification that the agency has a written policy/procedure in place requiring documentation of staff training regarding reporting of abuse.
      - 9) Conduct a review of the client files and on-site evidence as required by the monitoring tool.

### C. Client File Selection

Client files to be reviewed will be selected prior to the site visit using the sampling methods outlined below. BVCOG will bring the list of selected files to the entrance conference and will request certain files to be pulled as needed throughout the review. Additional files may be requested as time permits or if issues identified warrant further review. Monitors will attempt to review at least 10% of active client files (or no less than 10, whichever is greater) or more if time permits. Monitors will also attempt to review a selection of inactive client files to ensure proper discharge procedures were followed.

1. For the programmatic review, BVCOG will utilize a method similar to stratified random sampling for selecting client files in order to get the best cross section of files. A list of client numbers is generated from ARIES detailing the types of services received. Clients are randomly selected from each group or type of service.
2. Files for the Clinical Monitor's review are selected using a non-random sample based on the following factors: clients not meeting the standard of care for medical or lab visits, disease stage, acuity level, a high number of no-shows, type and number of medical needs identified, clients seeing a new medical provider, clients in intensive or medical case management, and possibly additional files identified by other monitors during the visit with significant medical issues.
3. Client files chosen for the data management review are selected using a simple random sampling method through a randomizer website of all clients served during the review period. Specific files may also be chosen if particular issues are identified.

### §3.04 SUPPLEMENTAL SITE VISITS

#### POLICY:

Supplemental Site Visits will be conducted for any established subcontractor as needed to assess compliance with new guidelines. The Brazos Valley Council of Governments reserves the right to conduct additional site visits as necessary.

#### PROCEDURE:

1. BVCOG staff will schedule a Supplemental Site Visit and send a copy of the appropriate monitoring tool(s) to each subcontractor no less than two (2) weeks prior to the review.
2. BVCOG staff will focus the review on newly established compliance criteria and may also review Administrative and Programmatic Policy and Procedure manuals, personnel files, client files, and any previous findings.
3. Employee or client interviews can be scheduled at BVCOG staff discretion. When scheduling and conducting client interviews, BVCOG will strictly uphold client confidentiality procedures and ensure that clients fully understand that the interview is completely voluntary and that they may opt out at any time.
4. BVCOG staff will communicate the results to the subcontractor in the form of a Supplemental Site Visit Report.
5. Any findings will need to be addressed in a formal Plan of Corrections which will occur in accordance with the *Plan of Correction* policy.

### **§3.05 FOLLOW-UP SITE VISITS**

#### POLICY:

When deficiencies are found that warrant additional site visits at a subcontractor, BVCOG staff will conduct Follow-Up Site Visits to verify that the Plan of Correction is being implemented. The Brazos Valley Council of Governments reserves the right to conduct additional Follow-Up Site Visits as necessary to verify the implementation of a Plan of Correction.

#### PROCEDURE:

1. BVCOG staff will conduct a Follow-Up Site Visit when a subcontractor receives a Priority Rating of I from the Priority Assessment Tool from the most recent site visit. BVCOG may also conduct follow-up site visits when it is determined necessary to ensure that a subcontractor is meeting contractual obligations and maintaining a consistent level of care. Follow-up site visits may also be conducted due to a change at the subcontracting agency, such as a change in management, staff, or other circumstance that might warrant a follow-up site visit.
2. BVCOG staff will conduct the Follow-Up Site Visit within six months following the adoption of the Plan of Correction for an agency that received a Priority I status.
3. BVCOG staff will contact the subcontractor to determine staff availability.
4. The Contract Monitor will focus his/her review on the findings from the Site Visit Report, any changes made to address the findings in the adopted Plan of Correction, and any newly established compliance criteria.
5. Employee or client interviews can be scheduled at BVCOG's discretion as needed to assist BVCOG in determining agency compliance and effectiveness of service delivery. When scheduling and conducting client interviews, BVCOG will strictly uphold client confidentiality procedures and ensure that clients fully understand that the interview is completely voluntary and that they may opt out at any time.
6. The Contract Monitor will send a letter to the subcontractor regarding the follow up Site Visit. In the letter, the Contract Monitor will state that an adequate system has been implemented to address each finding or recommend further action by the agency.
7. Failure to implement the Plan of Correction and address each finding to the satisfaction of the Administrative Agency could result in disallowed expenses for that time period, withheld reimbursements, or other sanctions.

### **§3.06 PLAN OF CORRECTION**

#### POLICY:

When findings are identified during a site visit, the subcontractor will be required to submit and implement a Plan of Correction to address all findings. A Plan of Correction may also be required when deficiencies are found through desktop monitoring or if issues are identified between site visits.

PROCEDURE:

1. BVCOG staff will notify a subcontractor of any findings in a written Site Visit Report. This report will be accompanied by a dated cover letter.
2. The subcontractor will have thirty (30) business days from the date of the cover letter to respond in writing to the Site Visit Report, unless given another timeline from BVCOG in the cover letter.
3. The response will include a Plan of Correction. The Plan of Correction will detail the manner in which the subcontractor will address each finding and will include a timeline of implementation for each step of the plan.
4. Failure to submit a Plan of Correction within the allotted timeframe may result in suspension of reimbursement or in the implementation of sanctions.
5. BVCOG staff will review the Plan of Correction for appropriateness and will either adopt or revise the Plan of Correction.
6. Once the Plan of Correction has been adopted or revised, BVCOG staff will follow the progress of the subcontractor's implementation of the established Plan of Correction.
7. Following the established deadlines, BVCOG staff will conduct follow up site visits as necessary based on the Priority Assessment Tool.
8. Follow up site visits will be conducted in accordance with the Follow up Site Visit policy.
9. The Brazos Valley Council of Governments reserves the right to schedule as many Follow-Up Site Visits as necessary to verify the implementation of a Plan of Correction.
10. Failure to implement a Plan of Correction will initiate the Sanctions Article of the Contract. This can include, but is not limited to, disallowing expense, suspending reimbursements, or terminating the contract.

**§3.07 SIGNIFICANT SITE VISIT FINDINGS**

POLICY:

When a site visit leads to the discovery of serious concerns about the quality of services that might negatively impact the health and safety of clients, BVCOG staff will meet to determine the appropriate manner in which the finding should be resolved and the appropriate sanction, if any, which should be imposed until the finding has been corrected.

PROCEDURE:

1. When a site visit leads to the discovery of serious concerns about the quality of services that might negatively impact the health and safety of clients, BVCOG will meet as soon as possible and will include appropriate DSHS staff if necessary.
2. Staff will discuss the concern to determine the appropriate course of action that needs to be taken in accordance with BVCOG policies to resolve the concern. This information will be articulated in a plan of action and conveyed to the subcontractor.
3. Depending on the severity of the concern, the Administrative Agency may elect to immediately institute sanctions against the subcontractor until the situation is resolved.
4. The Administrative Agency will address the concern in any manner necessary to assure client health and safety, up to and including, termination of the contract.

## **Section 4: Planning Policies**

### **§4.01 COMMUNITY INPUT**

#### **POLICY:**

To ensure that the voice of the community, those infected with and affected by HIV/AIDS, is a part of planning the delivery of services, planning activities will be carried out in accordance with the “Plan for Community Input in the Central Texas Planning Area” (Input plan attached to this policy).

#### **PROCEDURE:**

The BVCOG will conduct planning activities in accordance with the community input plan. Planning products will be open to public comment for a period of 30 calendar days, utilizing the input methods detailed in the input plan. Comment periods and input regarding planning products will be handled in accordance with § 4.04 of the BVCOG planning policies.

### **§4.02 REQUIRED INPUT**

#### **POLICY:**

In accordance with DSHS policy regarding required community input, the BVCOG will obtain community input when setting service category priorities, service category allocations, and in developing the comprehensive services plan. The BVCOG staff may obtain community input for other planning activities utilizing the methods detailed in the community input plan.

#### **PROCEDURE:**

The BVCOG staff will use input methods appropriate for each HSDA. The BVCOG staff will notify community members of the planning product in development. Community input and participation will be incorporated throughout the planning product’s development. The final draft of the planning product will be open to a 30 calendar day public comment period. Input will be handled in accordance with § 4.04 of the BVCOG planning policies.

### **§4.03 PUBLIC HEARINGS**

#### **POLICY:**

To comply with DSHS policy regarding community input requirements, the BVCOG will conduct a public hearing once a year in each HSDA of the Central Texas HIV/AIDS Planning Area.

#### **PROCEDURE:**

Notification of the public hearing will be posted in accordance with the Texas Open Meetings Act and other applicable state and federal laws. A legal notice of the public hearing will be placed in the newspaper with the largest circulation for the city in which the hearing will be held.

Other methods of advertising the hearing will be utilized in accordance with the input plan. BVCOG will make a full faith effort in recruiting as many people as possible for attendance of the public hearing.

Hearings will be conducted at a facility that is wheelchair accessible and in close proximity to public transportation whenever possible. The public hearings will be recorded, with those in attendance notified of the recording prior to the start of the hearing. Copies of materials being presented will be made available to those in attendance.

Public hearings, at minimum, will cover the comprehensive services plan, including the service category allocations for the next contract year.

#### **§4.04 COMMENT PERIOD AND USE OF INPUT**

POLICY:

The comment period for community input will be open for 30 calendar days and use the methods of community input as detailed in the community input plan. At the close of the comment period, the BVCOG Planner and Program Manager will review all comments / input.

PROCEDURE:

Comments / input received during the public hearing and the comment period will be evaluated based on economic and logistic feasibility; improvements to client services, delivery system, administration, or other system components. When appropriate, comments / input will be incorporated or change the planning product that is open to comment.

#### **§4.05 ANNUAL REVIEW AND UPDATE OF COMMUNITY INPUT PLAN**

POLICY:

The BVCOG Planner and Program Manager will review the community input plan on an annual basis to ensure that the plan reflects the best methods available in the CTHASA for people to provide input into the services planning process.

PROCEDURE:

The review will evaluate the input methods and their effectiveness. Those methods that are not effective in eliciting or collecting community input may be removed from the input plan. New methods may be added to replace those previously removed, or augment the overall collection of community input. The BVCOG Planner will keep track of all community input method suggestions offered throughout the year. These suggestions will be evaluated at the same time of input plan evaluation for possible inclusion in the plan.

## **Section 5: Data Management Policies**

### **§5.01 SYSTEM & SECURITY REQUIREMENTS**

#### **POLICY:**

The Brazos Valley Council of Governments, in accordance with Texas Department of State Health Services requirements, will enforce the following requirements prior to installing ARIES security certificates on subcontractor computers. All users' computers are required to comply with the minimum hardware criteria and security standards set forth in this policy.

#### **PROCEDURE:**

##### **A. Minimum Hardware Requirements**

The ARIES computer hardware must be adequate to run the program and its necessary functions that include the following criteria:

1. Broadband connection
2. Minimum of 256M of memory
3. Color screen
4. Internet Explorer 6.0 with all service packs and security patches or Internet Explorer 7
5. Windows 2000 operating system or higher

##### **B. ARIES security certificates will be installed on laptop computers only with DSHS approval and under the following requirements:**

1. The subcontractor has signed an ARIES Laptop Agreement that can be obtained from BVCOG;
2. DSHS approves the signed agreement;
3. The laptop user has a separate signed statement indicating receipt and understanding of laptop agreement/requirements;
4. The laptop is docked;
5. The laptop does not leave the office;
6. The laptop does not have a wireless Internet connection.

##### **C. Other Security Requirements**

In addition to minimum hardware and laptop use requirements, the following security measures must be demonstrated prior to ARIES security certificate installation:

1. The ARIES computer monitor is facing away from open doorways, hallways, or other areas so onscreen data/information cannot be accidentally seen by non-agency or non-pertinent personnel;
2. Only trained personnel who have a signed confidentiality statement in their personnel file performs ARIES data input;
3. Subcontractor computers with ARIES certificates installed on them are in a secure area/office and/or behind a door with a locking mechanism.

4. All ARIES passwords for all ARIES users must be 8-32 alphanumeric characters, including at least 1 number. Passwords may not include the following:
  - a. Any version of the user's name or username;
  - b. User's birthdate;
  - c. Agency name or abbreviation;
  - d. Sequential numbers (i.e. 12345678);
  - e. A password already in use by the user for accessing anything else (e.g. Windows password);
5. Users who are locked out of the ARIES system due to entering an incorrect password/username combination should contact the BVCOG Data Manager to have their password reset. Passwords will not be emailed and passwords will be given only to the user.
6. Certificates will not be installed on roaming Windows profiles.
7. ARIES may be accessed solely by the person whose name is on the ARIES certificate used. Logins and certificates will be approved only for individual users; no generic or shared logins will be approved.

## **§5.02 ENTRY OF FUNDING INFORMATION IN ARIES**

### POLICY:

The Brazos Valley Council of Governments will add and deactivate subcontractor funding information, including contracts not administered by BVCOG, in the ARIES system for all subcontractors according to the procedures below. BVCOG will automatically update ARIES for all BVCOG-administered contracts, but subcontractors are responsible for notifying BVCOG of HIV services contracts administered by other entities. Prevention funding and other funding not impacting HIV-positive client or affected client services will not be entered into ARIES.

### PROCEDURE:

#### A. Adding a New Contract

1. Subcontractors requesting additional non-BVCOG-administered HIV services contracts to be entered into the ARIES system must notify the AA (BVCOG) in writing (may be e-mail or a mailed letter) with the following information for each contract. All additional funding sources for HIV services must be entered as contracts in ARIES.
  - i. Agency name
  - ii. Funding source
  - iii. Formal contract name
  - iv. Contract number
  - v. Start and end dates for the contract
  - vi. Amount funded
  - vii. Service categories funded: primary, secondary, and agency subservice level
  - viii. Amount allocated for each secondary and agency subservice

- ix. If applicable, for each agency subservice: unit of service, unit of service goal, unduplicated clients goal, default number of units per delivery
2. BVCOG will review and add the contract information once completed information is received.
3. Subcontractors will notify BVCOG of any reallocations or other funding changes for non-BVCOG-administered contracts in a timely manner.
4. Contracts will be deactivated under the following circumstances:
  - i. Contract termination due to noncompliance or lack of funding;
  - ii. Incorrect contract entry.

### **§5.03 ARIES USERS & USER PERMISSIONS**

#### POLICY:

The Brazos Valley Council of Governments will add to and remove users, as well as set user permissions, from the ARIES system for all subcontractors according to the procedures below. ARIES user groups and their corresponding permissions are intended to protect the quality and confidentiality of data entered. The Brazos Valley Council of Governments requires that subcontractors work with BVCOG to classify all ARIES users into appropriate ARIES user groups.

Agency staff, in accordance with a Texas Department of State Health Services directive, will not have permission to edit, create, or deactivate on any of the following ARIES screens:

1. Agency Info
2. Funding & Contracts
3. Staff Edit
4. Staff Permission

BVCOG cannot, in accordance with DSHS HIV/STD Policy 241.000, create users “whose sole need for access relates to surveillance, research, grant reporting, or other ancillary uses for these data.”

Agency Administrators and Agency Management should request customization of ARIES user permissions for their staff by contacting the BVCOG Data Manager via email. The Data Manager will work with the agency to establish a set of permissions for each user that allows for the most efficient data management. Users with questions regarding permissions are asked to first consult the ARIES User Manual §4.2.5-6 prior to contacting BVCOG with queries.

#### PROCEDURE:

##### A. Adding New Users

1. Subcontractors requesting new user access to the ARIES system must notify the AA (BVCOG) in writing using the BVCOG New ARIES User form. The form must also be accompanied by a faxed copy of the user’s signed agency confidentiality form.

2. BVCOG will review and add new users once completed information is received. Permissions for the new user will be set according to BVCOG Policy §5.04.
3. BVCOG will authorize agency to install new users' certificates on the appropriate subcontractor computer(s) within 5 business days of entry of the new user into ARIES, unless staff is unavailable in which case the subcontractor will be notified in a timely manner of a revised timeline for certificate installation.
4. The subcontractor will conduct primary training of new users, but technical assistance should be requested from BVCOG if necessary.

**B. Removing User Access**

1. Subcontractors are required to notify the AA (BVCOG) via email of any changes to staff who have access to the ARIES system the same business day as or prior to the staff person's termination of employment.
2. BVCOG will notify DSHS the same business day of notification by the subcontractor to deactivate the user so that DSHS can revoke the user certificate.
3. BVCOG will remove the user permissions, removing access to the ARIES system. The profile will be deactivated, if deemed necessary, by DSHS.

**C. User Permissions**

New user permissions will be established based on the user group indicated on the new user form and by answers to the following questions on the new user form:

1. Does this user's position require that they be able to view client medical and/or risk information?
2. Does this user's position require that they be able to enter/edit client medical and/or risk information?
3. Does this user's position require that they be able to run reports in ARIES?
4. Does this user's position require that they be able to view client case notes?
5. Does this user's position require that they be able to enter/edit client case notes?
6. Does this user's position require that they be able to view client contact information?
7. Does this user's position require that they be able to enter/edit client contact information?
8. Is this user in a supervisory position?
9. Will this user be responsible for signing and sealing of case notes?
10. Is this user's sole need for access to ARIES related to surveillance, research, grant reporting, or another ancillary use for data?

**§5.04 CLIENT SHARING IN ARIES**

POLICY:

The Brazos Valley Council of Governments and the Texas Department of State Health Services require that each client file include the signed ARIES Client Information Sharing Consent Form (or a BVCOG-approved substitute consent form) indicating whether the client agrees to share their information in ARIES. No client information may be shared without the express written consent of the client. A copy of the consent form may be substituted for the original if the client

has previously agreed to share information in ARIES through another AIDS services organization. “Client consent” applies only to information sharing, not to the actual entry of client information in ARIES – all agency HIV services clients are required to be entered in ARIES.

PROCEDURE:

- A. All clients will be presented the BVCOG-distributed ARIES client consent form (or a BVCOG-approved substitute consent form) at the time of intake by their Case Manager (or other appropriate agency staff), who will explain in detail the effects of choosing to share or not share their information in ARIES. Case managers should also explain to clients that share status does not have an impact on whether client information is entered in the system and that client consent is not required for ARIES entry. This discussion may take place via phone if the client cannot meet face-to-face. Agency staff are required to fully answer any questions the client has regarding ARIES and consult with BVCOG if further clarification is needed. This discussion should be documented in the client’s case notes. The consent form may not be mailed to the client to be signed without the aforementioned explanation by the client’s Case Manager.
- B. All clients will be asked to indicate their sharing preference on the ARIES Client Consent Form after the staff member is satisfied that the client understands the implications of their decision.
- C. The signed ARIES client consent form will be filed in the client’s file and the corresponding share status will be indicated in their ARIES profile the same day as when the form is signed.
- D. The ARIES client consent form will be added to the Eligibility Documents list in ARIES at the same time the share status is updated.
- E. All clients will be advised that they may revoke authorization to share at any time and for any reason. Agency staff will provide them with an Authorization to Revoke Consent form if requested.

**§5.05 ELEMENTS REQUIRED FOR ENTRY IN ARIES**

POLICY:

The Brazos Valley Council of Governments and Texas Department of State Health Services strongly encourage subcontractors to use the ARIES system to the fullest extent of its capabilities. Subcontractors are required to ensure the correct entry and consistent updating of required client data and service elements in ARIES for each HIV-positive client. ARIES is intended to be a “real time” system and accomplishing this requires timely data entry.

Subcontractors are required by the AA to develop policies addressing the implementation and quality management of the elements contained in this policy. Subcontractor policies should at a

minimum include details of who will be responsible for the entry of data and the monitoring of data quality. The language and implementation of these policies will be monitored on a regular basis.

#### PROCEDURE:

Subcontractors are required to ensure correct entry and consistent updating of the following *minimum* client data and service elements in ARIES for each client.

1. First name, last name, middle initial (when applicable), mother's maiden name (MMN), date of birth, and gender;
  - The client's first and last names and middle initial should be entered in ARIES as they appear on some form of legal identification (e.g., driver license, military id).
  - If a client does not have a middle initial, the field must be left blank.
  - If a client's MMN is not known and cannot possibly be obtained, the client's own last name should be used. Every possible avenue (e.g., asking client to contact their relatives, check their birth certificate, etc.) for obtaining the MMN must be exhausted before the client's last name is used. Efforts to obtain the correct MMN must be documented in the client's case notes.
2. All available information outlined in the following ARIES sections:

#### **Demographics**

1. The subcontractor should enter information for new clients within 2 business days of the client enrollment date.
2. *At a minimum*, the following elements must be entered into ARIES:
  - a. Current client contact information – including fields for Residence, Emergency, and client's mail/phone contact preferences.
  - b. Client demographic detail – including fields for Client Identifiers, Hispanic, Race 1, and Primary Language
  - c. Client living situation – including fields for Current Living Situation Since and Living Situation
  - d. Current client HOPWA information – all fields (if applicable). Area Median Income is not a required field for HOPWA funds distributed by BVCOG.
  - e. Current client Agency Specifics – including fields for Share Data, Agency Status, Status as of Date, and Agency Enrollment Date
3. Clients should be required to complete a written contact information update sheet that includes primary contact information and emergency contact information on an annual basis. This hard copy should be filed in the client's file.
4. Client contact information should be updated in ARIES immediately after a change is conveyed by the client or on an annual basis.

#### **Eligibility**

1. The subcontractor should enter eligibility information in ARIES within 5 business days of receiving information from a client.
2. *At a minimum*, the following element(s) must be entered in ARIES:

- a. Current client eligibility documents – including fields for HIV Letter of Diagnosis, Proof of Residency, Proof of Income (if required by the agency or program), Release of Information, ARIES Consent Form, and Agency Consent Form. Subcontractors must file hard copies of these documents in the appropriate client file at the time of entry of the information in ARIES. Outdated or replaced eligibility documents may be deactivated by the agency.
  - b. Current financial information – including fields for Client and Household Information.
  - c. Current insurance information – every client must have exactly one “primary insurance” entry. Clients with no insurance must have “No Insurance” listed as their Source and Type. All available insurance information, including start dates and policy numbers, must be entered in ARIES.
3. Hard copies of the above information – e.g. Letter of Diagnosis – must be kept in the client’s file.

### **Programs**

1. The subcontractor should enter all available program information in ARIES within 5 business days of receiving information from a client.
2. *At a minimum*, the following element(s) must be entered in ARIES:
  - a. Current staff assignment information
  - b. Current information, as applicable, for CARE/HIPP
3. Any forms pertaining to programs the client is enrolled in must be kept in the client’s file.
4. Client program information should be updated in ARIES immediately after any change becomes effective.

### **Medical**

1. The subcontractor should enter medical information in ARIES within 5 business days of receiving information from a client or medical professional.
2. *At a minimum*, the following element(s) must be entered in ARIES:
  - a. Basic Medical information – including fields for Primary Med Care, Primary HIV Care, CDC Disease Stage, HIV Test information, AIDS Defining Conditions (if applicable), and # Partners to be Notified by Health Department
  - b. Medical History information – including fields for CD4 Tests, Viral Load Tests, STI/Hepatitis Tests, Tuberculosis information
  - c. Ob/Gyn & Pregnancy information (if applicable)
3. Any available hard copy corroboration of medical information must be kept in the client’s agency case management/medical records file.

### **Medications**

1. The subcontractor should enter medication information in ARIES within 5 business days of receiving information from a client or medical professional.
2. *At a minimum*, the following element(s) must be entered in ARIES:
  - a. Available Antiretroviral (ART) medications information – including fields for ART Type, Antiretroviral Drugs, and prescribing physician..

3. Any available hard copy corroboration of medical information must be kept in the client's agency case management/medical records file.
4. Subcontractors are strongly encouraged to gather ART medication adherence information from clients and track adherence with the ARIES system.

### **Risk Factors**

1. The subcontractor should enter risk factor information in ARIES within 5 business days of receiving information from a client.
2. *At a minimum*, the following element(s) must be entered in ARIES:
  - a. Risk Factors information – Client Risk Factors
3. The following ARIES sections are required to be utilized for case management clients according to the following *minimum* requirements:

### **Case Notes**

1. The BVCOG requires that subcontractors enter all case notes into ARIES in an efficient manner, that case notes are “signed & sealed” by a qualified supervisor, and that case notes are printed and filed on a regular basis. All case management funded by BVCOG must be included in ARIES case notes.
2. Case note entry
  - a. All case notes are required to be entered in ARIES within 4 business days of the activity date.
  - b. Case notes must be entered accurately utilizing the “Type” and “Category” fields on the Case Note screen.
  - c. Any personal thoughts on the client, descriptions of the client, or other personal comments that do not affect services should be categorized as “Impressions” and saved as a separate type case note – all “Impressions” case notes should be marked as unshared by the person entering the case note.
3. Sign & Seal:
  - a. Case notes are required to be signed & sealed by a qualified staff member in a supervisory role (e.g. case management supervisor or program manager) within 8 business days of the activity date.
  - b. Staff members tasked with signing & sealing case notes are required to review case notes prior to signing & sealing in order to ensure the quality of the information entered.
  - c. Staff members may not sign and seal their own case notes – supervisors who both compose and sign and seal case notes must have another qualified staff member sign and seal their notes.
4. Printing case notes:
  - a. Subcontractors are required to print signed & sealed case notes at least once per month.
  - b. Case note printouts are required to be filed in their respective client file.

### **Service Deliveries**

1. Service delivery entry

- a. All service deliveries are required to be entered in ARIES within 4 business days of delivery.
- b. Invoiced service deliveries provided outside of the agency, services should be entered within 10 business days of receipt of invoice by the agency.
- c. The method for identifying the client served is at the subcontractor's discretion.
- d. All fields with a red star are required to be completed.
- e. All services entered are required to have the appropriate cost assigned, unless the service is truly zero-cost. No BVCOG-funded contract services may be zero-cost.

### **Needs Assessment**

1. The BVCOG requires that subcontractors complete a needs assessment in ARIES for each case management client on, at minimum, a semiannual basis.
2. Needs assessments are to be printed and filed in client files on a regular basis.

### **Care Plans**

1. The BVCOG requires that subcontractors initiate a care plan in ARIES for each client on, at minimum, a semiannual basis.
2. Content of care plans must be adequate according to the clinical and programmatic requirements of the BVCOG and DSHS.
3. One care plan should be created for each new need.
4. Care plans are required to be updated on an ongoing basis with tasks, referrals, and services.
5. Care plans for needs that continue with the subsequent needs assessment do not need to be recreated – a task that indicates the need was reassessed and still remains should be added to the existing care plan.
6. Service deliveries and referrals corresponding with a care plan should be entered through the appropriate care plan screen.
7. Care plans are required to be printed and appropriately filed at least every 6 months. If required by the agency's internal policies, clients sign the initial care plan print-out, but do not need to sign printed care plan updates.

### **Referrals**

1. The BVCOG requires that subcontractors track referrals provided in ARIES for each client on an ongoing basis.
2. Referrals are required to be updated on an ongoing basis with as much information as possible, including Outcome and Outcome Date.

## **§5.06 DATA QUALITY REVIEW**

### POLICY:

The Brazos Valley Council of Governments will work with all subcontractors to ensure a high level of quality of data in the Central Texas Planning Area. Subcontractors will be notified when missing or unknown data is found and will be required to correct the data within the timeframe

outlined by BVCOG. BVCOG will provide assistance to the subcontractors when possible and may require corrective action or impose sanctions for noncompliance.

PROCEDURE:

- A. Review of data quality
  - 1. BVCOG will run custom reports to determine unknown or missing data on a monthly basis for the first six months ARIES use at each agency and on at least a quarterly basis thereafter.
  - 2. BVCOG will review these reports to determine compliance with BVCOG data management policies.
- B. Notification
  - 1. The subcontractor will be notified immediately in writing if it is determined that they are out of compliance with BVCOG data management policies.
  - 2. The written notice will be an email detailing minor data discrepancies. Agencies will be notified of critical data issues with a formal letter.
  - 3. The subcontractor has 30 days from the date of written notice to correct any discrepancies and notify BVCOG, unless BVCOG specifies a different timeframe. If technical assistance is required, the subcontractor should refer to the BVCOG Data Management Technical Assistance Policy §5.08.
  - 4. If the subcontractor requires technical assistance in order to correct the data or BVCOG determines that technical assistance is needed, BVCOG will arrange a meeting, either via conference call or in person, to discuss steps to be taken and ways that BVCOG can assist the subcontractor.
  - 5. Once sufficient evidence is submitted to the AA that the problem is corrected, the AA will send the subcontractor written notification of compliance with the requirement.
- C. BVCOG will respond to multiple incidents of noncompliance according to the BVCOG Technical Assistance for Noncompliance Policy §2.06 and Subcontractor Sanctions for Contract Noncompliance Policy §2.07.
- D. BVCOG will conduct annual on-site and desktop monitoring of each subcontractor, in accordance with BVCOG Site Visit & Monitoring Policies.

**§5.07 DATA MANAGEMENT TECHNICAL ASSISTANCE & TRAINING**

POLICY:

Due to the various needs regarding data management that will arise for subcontractors, the Brazos Valley Council of Governments will provide technical assistance at the start of a contract for newly funded subcontractors and on an as-needed basis throughout the contract period. The subcontractor may request additional technical assistance after the initiation of a contract. BVCOG will also initiate technical assistance as needs are identified through correspondence with and monitoring of subcontractors. BVCOG will also conduct an annual all-subcontractor

in-person data management training session covering topics to be determined by BVCOG and subcontractor staff.

PROCEDURE:

A. Contract Start-Up

3. Within three (3) months of the date that an agency commences services, the Contract Monitor will schedule an Orientation Site Visit, which will be attended by the Data Manager. This site visit will be conducted consistent with the policy on BVCOG Monitoring of Newly Contracted Subcontractors Policy §3.03.
4. The BVCOG staff will install ARIES security certificates within one (1) month of start-up. Initial training on the data collection application will be provided to all agency ARIES users.

B. Further Technical Assistance

5. The BVCOG will provide support and training requested by the subcontractor as needed for the data collection application.
6. The BVCOG will also provide additional technical assistance as needed. Technical assistance will be provided mainly through e-mails, phone calls, meetings, and through the Administrative Agency's website. The Data Manager will first attempt to resolve technical issues by phone or email. Site visits will also be conducted as warranted by program or project needs.

C. Requests for Technical Assistance

7. Technical assistance needs that are minor and can be addressed quickly should be completed over the telephone or by email when appropriate.
8. For technical assistance needs that cannot be addressed over the telephone or email, requests should be made in writing, and sent to the Administrative Agency.
9. The Administrative Agency staff has five (5) business days to attempt contact regarding the request. This timeframe may be extended if the appropriate staff is unavailable.
10. If a request is made in writing and the appropriate staff is unavailable, the request may be forwarded to the Program Manager and/or Executive Director for an attempt at contact.
11. When contact is made, the Administrative Agency staff member will assess the request and determine the most appropriate response with the agency.
12. Technical assistance requests will be logged in a technical assistance log maintained by BVCOG.

## **§5.08 SUBCONTRACTOR INTERNAL POLICIES**

POLICY:

Brazos Valley Council of Governments' subcontractor agencies are required to establish internal data management policies/procedures that address the following topics:

**1. Data security**

Must outline internal procedures for ensuring data security and assignment of staff responsibility for monitoring data security.

**2. Compliance with BVCOG data policy timelines**

Must outline internal procedures for data entry, responsibility for monitoring and ensuring that BVCOG data policy timelines are met, and responsibility for signing and sealing.

**3. Management/improvement of data quality**

Must outline how data management will be integrated into the agency's overall quality management plan, running and reviewing ARIES reports for internal quality monitoring, and how corrections will be made when problems are identified.

**4. New user training**

Must outline when new user training will take place and who will conduct it, provisions for increased oversight of new users, and how new users will be trained to present and explain the ARIES client consent for sharing form to clients.

**5. ARIES client consent**

Must outline how information about ARIES will be conveyed to clients who do not speak English, consent procedures for clients of diminished mental capacity, staff responsibility for explaining ARIES and sharing to clients, and who will be filing the client form and changing share information in ARIES.

BVCOG will provide assistance on agency data management policies if requested by the agency.

These policies must be reviewed and approved by BVCOG and should reflect a commitment to improving data quality at the agency level. Once the policies are approved BVCOG will monitor to ensure that the policies are applied consistently throughout the agency. All pertinent staff must be provided with a copy of the internal and BVCOG data management policies.