

EARLY INTERVENTION SERVICES (EIS)

DEFINITION:

Early Intervention Services (EIS) includes counseling individuals with respect to HIV/AIDS; testing (including tests to confirm the presence of the disease, tests to diagnose the extent of immune deficiency, tests to provide information on appropriate therapeutic measures); referrals; other clinical and diagnostic services regarding HIV/AIDS; periodic medical evaluations for individuals with HIV/AIDS; and providing therapeutic measures.

NOTE: EIS provided by Ryan White Part C and Part D Programs should NOT be reported here. Part C and Part D EIS should be included under Ambulatory/Outpatient Medical Care.

SERVICES:

Early Intervention Services (EIS) are the provision of a combination of services that include the following services as related to HIV/AIDS: counseling, testing, referrals, and other clinical and diagnostic services designed and coordinated to bring individuals with HIV disease into the local HIV continuum of care. These services must focus on expanding key points of entry and documented tracking of referrals.

Benefits counseling, referrals, and linkages to care may include enrollment in Medicaid, Medicare, or private insurance plans through the health insurance marketplace established under the Affordable Care Act.

Counseling, testing, and referral activities are designed to bring HIV positive individuals into Ambulatory/Outpatient Medical Care and may be provided by Ryan White Part B or State Services funds. The goal of EIS is to decrease the number of underserved individuals with HIV/AIDS by increasing access to care. EIS also provides the added benefit of educating and motivating clients on the importance and benefits of getting into care. Individuals found to be HIV negative should be referred to appropriate prevention services.

PERSONNEL:

Staff Qualifications	Expected Practice
The agency's facility(ies) shall be appropriately licensed or certified as required by Arizona Department of Health Services, for the provision of HIV Early Intervention Services, including phlebotomy services.	Personnel files/resumes/applications for employment reflect requisite experience and education.
Staff providing care and/or counseling services to clients participating in the Early Intervention program must be trained to provide these services to recently diagnosed HIV/AIDS clients and to PLWHAs who know their status	Facility License on file.

<p>and are not in care. They also must receive supervision by a senior member with experience and skill in the field.</p> <p>All agency staff that provide direct-care services shall possess:</p> <ul style="list-style-type: none"> • Arizona Department of State Health Services current certification as an HIV Prevention counselor, or advanced training/experience in the area of HIV/infectious disease specialty; • HIV early intervention skills and abilities as evidenced by training, certification, and/or licensure, and documented competency assessment; and • The skills necessary to work with a variety of health care professionals, medical case managers, and interdisciplinary personnel. 	
<p>Each agency staff person who provides direct services to clients shall be properly trained in case management. Supervisors will be a degreed or licensed individual (by the State of Arizona) in the fields of health, social services, mental health, or a related area, preferably Master’s Level.</p>	<p>Personnel files/resumes/applications for employment reflect requisite experience and education.</p>
<p>A minimum of sixteen (16) additional hours of orientation training must cover orientation to the target population and the HIV service delivery system in the Phoenix Eligible Metropolitan Area (EMA), including but not limited to:</p> <ol style="list-style-type: none"> a. The full complement of HIV/AIDS services available within the EMA b. How to access such services [including how to ensure that particular subpopulations are able to access services (i.e., undocumented individuals)] c. Ryan White Standards of Care (Universal and Service Category Standards) d. Education on applications for eligibility under entitlement and benefit programs other than Ryan White services will be included and periodically updated as changes occur. 	<p>Personnel file reflects completion of orientation and signed job description.</p>
<p>Twenty-four (24) hours of annual training are required for all employees. The 4 hours shall include fifteen (15) hours of medical training, six (6) hours of psychosocial training and three (3) hours of quality management training.</p> <p>The medical training shall cover topics of Medical Adherence, HIV Disease Process, Oral Health, Risk Reduction/Prevention Strategies (including Substance Abuse Treatment) and Nutrition.</p>	<p>Personnel files reflect training log with documentation of subject matter and attendance at twenty-four (24) hour comprehensive educational program annually.</p>

<p>A suggested additional topic may be End of Life Issues. Medical training shall also include training on documentation. The psychosocial training shall include the topics of AIDS and the law, medically related federal and state benefits programs (e.g. Social Security, Medicare, Medicaid and Affordable Care Act).</p>	
<p>Case managers and case management supervisors must satisfactorily complete continuing education as required by state licensing boards</p>	<p>Documented in personnel file or training log.</p>
<p>Each case management agency must have and implement a written plan for supervision of all case management staff.</p> <p>Supervisors must review a 10 percent sample of each case manager's case records each month for completeness, compliance with these standards, and quality and timeliness of service delivery.</p> <p>Case managers must be evaluated at least annually by their supervisor according to written Agency policy on performance appraisals.</p>	<p>Agency has written plan for supervision of all case management staff.</p> <p>Agency will keep on file supervision logs demonstrating the review of random client files citing the date and outcome of chart reviews</p> <p>Personnel files contain annual performance evaluations</p>
<p>Each supervisor must maintain a file on each case manager supervised and hold supervisory sessions on at least a monthly basis. The file on the case manager must include, at a minimum:</p> <p>a. Date, time, and content of the supervisory sessions</p> <p>b. Results of the supervisory case review addressing, at a minimum of completeness and accuracy of records, compliance with standards and effectiveness of service.</p>	<p>Documentation of supervision provided.</p> <p>Supervisors' files on each case manager reflect ongoing supervision, supervisory sessions and case review as described above.</p>

QUALITY MANAGEMENT:

Program Outcome:

- The goal of EIS is to decrease the number of underserved individuals with HIV/AIDS by increasing access to care.

Indicators:

- Number of clients brought into care
- Number of clients returned to care.

Service Unit(s):

Face-to-face visit and/or documented phone conversation in CAREWare.

<i>EIS Standard of Care</i>	<i>Outcome Measure</i>	<i>Numerator</i>	<i>Denominator</i>	<i>Data Source</i>	<i>Goal/Benchmark</i>
Service Provider shall provide physical examination and assessment to identify urgent health issues/need.	Documentation of physical examination in client files.	Number of newly enrolled clients	Number of EIS Clients	Client Charts and CAREWare	75% of newly enrolled EIS clients will have documentation in their files of a physical examination.
Service Provider shall provide client education concerning the HIV disease process, risk reduction, and maintenance of the immune system.	Documentation of client education in client files.	Number of newly enrolled clients	Number of EIS Clients		75% of newly enrolled EIS clients will have documentation of education given regarding HIV disease process, risk reduction, and maintenance of the immune system.
Service Provider shall develop an initial care plan in direct cooperation and agreement with the client that identifies client needs, resources, goals, and planned course of action to meet immediate needs, and revise the plan as necessary.	Documentation of Care Plan and follow up reassessment of care plan as indicated, in client files.	Number of newly enrolled clients	Number of EIS Clients	Client Charts and CAREWare	75% of newly enrolled EIS clients will have documentation of a Care Plan and follow up reassessment of the care plan as indicated, in client files.
Service Provider shall maintain and coordinate care plan to enable transfer to primary medical case management.	Documentation of Care Plan coordination and referral to Primary Medical Case Management.	Number of newly enrolled clients	Number of EIS Clients	Client Charts and CAREWare	75% of newly enrolled EIS clients will have documented care plans with coordination and referral to Primary Medical Case Management.
EIS programs will ensure that clients are connected to Primary Medical Care within 30 Days of initial intake.	Documentation of first medical visit within 30 days of EIS intake in client files.	Number of newly enrolled clients	Number of EIS Clients	Client Charts and CAREWare	75% of newly enrolled EIS clients will have their first medical visit within 30 days of their EIS intake in their client files.
EIS programs will make available mental health and psychosocial support services performed by a master's level social worker and/or other appropriate licensed healthcare provider or counselor. Services will be provided in	Documentation of mental health and psychosocial support services screening and/or assessment in client files.	Number of newly enrolled clients	Number of EIS Clients	Client Charts and CAREWare	75% of newly enrolled EIS clients will have documentation of mental health and psychosocial support services screening and/or assessment in client files.

<p>accordance with the National Association of Social Workers' Code of Ethics. Mental health and psychosocial services will include (but not be limited to):</p> <ul style="list-style-type: none"> • Comprehensive psychosocial assessment of all new clients including: • Mental health or substance use issues • Client's adjustment to HIV disease and illness • Client's understanding of diagnosis and treatment • Recommended treatment • Barriers to treatment adherence • History of client's family background, education, vocational experience, and housing status. • Development of an individualized psychosocial treatment plan. 					
<p>Individual, group, couple, family and/or counseling and crisis intervention services may also be offered for those clients who are experiencing acute or ongoing psychological stress. Such services will usually be provided on a regularly-scheduled basis with special arrangements made for non-scheduled visits at the time of crisis. All mental health services will be provided in accordance with the approved Mental Health and Substance Abuse Services Outpatient Standards of Care.</p>	<p>Documentation of referral to Mental Health and Substance Abuse Services Outpatient as indicated in client files.</p>	<p>Number of newly enrolled clients</p>	<p>Number of EIS Clients</p>	<p>Client Charts and CAREWare</p>	<p>75% of newly enrolled EIS clients will have a documented referral where indicated for Mental Health and Substance Abuse Services-Outpatient in their client files.</p>
<p>Counseling and Crisis intervention services will be offered as needed</p>	<p>Documentation of agency policy and protocol for counseling and crisis intervention services.</p>	<p>Number of agencies with</p>	<p>Number of contracted EIS agencies</p>	<p>Agency Policy and Procedure Manual</p>	<p>75% of newly enrolled EIS clients will have access, as indicated, to</p>

and provided in accordance with current approved standards of care.		counseling services			counseling and crisis intervention services.
<p>EIS programs are encouraged to work in partnership with clients to develop and track health self-management goals in such critical areas as:</p> <ul style="list-style-type: none"> • Adherence • Exercise • Substance abuse • Sexual risk management • Nutrition • Oral Health 	Documentation of self-management /goals in client files.	Number of newly enrolled clients	Number of EIS Clients	Client Charts and CAREWare	75% of newly enrolled EIS clients will have documented self-management goals in client files.

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