

Quick Reference Handout 7.3: Developing and Updating Service Standards

What are service standards? Written guidelines that outline for subrecipients the elements and expectations for implementing a service category in a RWHAP Part A jurisdiction. Service standards are designed to ensure that all subrecipients provide the same basic service components and establish a minimal level of service or care. Service standards should describe the services so that anyone who reads them can understand what the service is and what a client can expect when receiving the service.

Users of Service Standards

- **People needing services:** Any client or potential client should be able to read service standards and know what to expect “when accessing or receiving RWHAP funded services.”
- **Subrecipients/Service Providers:** “Service standards define the core components of a service category to be included in the model of service delivery.”
- **PC/PBs:** Service standards help PC/PBs understand what activities are being provided by subrecipients – and can help them identify possible changes/improvements.
- **Recipient:** Service standards are used in Requests for Proposals, subrecipient contracts, and monitoring (including site visits and chart reviews) “to ensure that services are provided to clients in a consistent manner across service providers.”
- **Quality Managers:** “Service standards are the foundation for the clinical quality management program, and provide the framework and service provision from which processes and outcomes are measured.”

Responsibility for service standards is not addressed directly in the legislation, but HRSA HAB expectations are stated in a Guidance published in 2014. It says that the recipient is “responsible for the development, distribution, and use of service standards,” and that for RWHAP Part A programs, “developing service standards is a shared responsibility, typically led by the Planning Council.”

Understanding Service Standards

- **The term:** The earlier term was “standards of care,” but that has been used outside RWHAP to refer to medical care and treatment, and RWHAP service standards cover both medical and support services.
- **Local standards:** National service standards are not feasible due to differences in state and local requirements and the need to tailor services to address differences by jurisdiction – so each Eligible Metropolitan Area (EMA) or Transitional Grant Area (TGA) develops its own service standards, as does each RWHAP Part B program.

- **Guidance for content:** Service standards for medical care must be consistent with Federally Approved Clinical Practice Guidelines for HIV/AIDS and “other clinical and professional standards.” Service standards for non-clinical/support services may be based on “evidence-based best practices, National Monitoring Standards, and/or guidelines developed by state or local government.”
- **Universal and service category-specific standards:** A jurisdiction’s service standards typically include universal service standards that apply to all service categories, and separate standards for each funded service category. Often universal standards are prepared separately, to avoid repeating them in the standards for each service category.
- **Availability:** Service standards should be readily available to providers, people with HIV, and the broader public, on the recipient and/or PC/PB websites.

Contents of Service Standards

Topics to Address in Service Standards

- Service Category Definition
- Intake and Eligibility
- Key Service Components and Activities
- Personnel Qualifications (including licensure)
- Assessment and Service Plan (where applicable)
- Transition and Discharge
- Case Closure Protocol
- Client Rights and Responsibilities
- Grievance Process
- Cultural and Linguistic Responsiveness
- Privacy and Confidentiality (including securing records)
- Recertification Requirements (where applicable)

What *Not* to Include

Your jurisdiction should not include performance measures or health outcomes in your service standards. Use of these measures is a recipient responsibility. Recipients include performance standards in their RFPs for selecting subrecipients, and those potential subrecipients indicate in the application their ability to meet them. Subrecipients have performance measures in their contracts, and monitoring by the recipient assesses whether these measures, which are based on the service standards, are being met. Such compliance monitoring is a recipient responsibility, not a PC/PB responsibility.

Developing or Updating Service Standards

If your EMA or TGA decides to fund a service category for the first time, the PC/PB and recipient will need to develop service standards for that service category. If you already have service standards, either universal or service category-specific, the appropriate PC/PB committee should review them periodically and update them as needed.

Steps for Developing Service Standards

1. **Assign responsibility**, usually to a committee such as Care Strategy or System of Care, with the ongoing active involvement of recipient staff.
2. **Determine priorities.** Your list should include all service categories that are currently funded or will have allocations for the first time next program year. To decide on the order of development, use clear criteria such as a service category's allocation level or its local priority among services.
3. **Set a timeline** that fits into your annual calendar.
4. **Review and agree on an outline** to be used for all service category-specific standards
5. **Develop Universal Standards** that apply to all service categories. Address such topics as:
 - Access to Services
 - Intake & Eligibility, Transition & Discharge, and Privacy & Confidentiality
 - Agency Policies & Procedures
 - Client Rights & Responsibilities
 - Cultural & Linguistic Competence
 - Grievance Process
 - Personnel, Training, Licensing & Supervision
 - Program Safety
6. **Establish a process** for drafting service standards that:
 - Includes a review of federal guidelines such as the National Monitoring Standards, standards from other jurisdictions, and relevant state and local requirements.
 - Includes ongoing recipient representation/participation.
 - Provides for input from providers, people receiving RWHAP Part A services, and other experts, including RWHAP-funded and other service providers.
 - Manages potential conflict of interest by ensuring that sub-recipients (service providers do not dominate the process in numbers or influence.
 - Uses a combination of meetings and written input and reviews.
7. **Develop service standards using the agreed-upon process.** Reference Universal Standards in the service category-specific standards and specify any differences (such as higher or lower income eligibility), but do not repeat content that is in your Universal Standards.
8. **Present draft standards for review** by the PC/PB – allowing time for discussion -- and by the recipient.
9. **Make needed revisions, then allow for external review** by providers, service clients, and other experts.

10. Consider and integrate external input in to your draft standards.

11. Finalize service standards by vote of the PC/PB, then post them on your website.

Reviewing and Updating Service Standards

Service standards need to be reviewed regularly – at least every three years – and updated as needed to incorporate the need for changes to improve outcomes, legislative or HRSA HAB administrative changes in service category definitions and descriptions, changes in guidelines for HIV care and treatment, and/or new or revised state or local requirements (e.g., licensing or certification changes). Review of outcomes data or monitoring results of monitoring may identify a need for changes in service standards. Establish a review cycle and put it on the annual committee and PC/PB calendars. When changes are needed in your service standards, obtain technical input and public review in the same ways as for their original development.

References

1. Service Standards, Ryan White HIV/AIDS Program. HRSA HAB Guidance. 2012
2. Ryan White HIV/AIDS Program (RWHAP) National Monitoring Standards for RWHAP Part A Recipients. June 2022. Division of Metropolitan HIV/AIDS Programs HIV/AIDS Bureau (HAB)