

Virginia Department of Health
 Division of Disease Prevention
 HIV Care Services
 Service: Standards

**Health Education/Risk Reduction (HE/RR)
 2009-2010**

Definition: Health education/risk reduction is the provision of services that educate clients with HIV about HIV transmission and how to reduce the risk of HIV transmission. It includes the provision of information; including information dissemination about medical and psychosocial support services and counseling to help clients improve their health status.

Objectives for Service:

- Promote and reinforce safe behavior for the prevention of HIV
- Provide HIV information to clients to promote positive health outcomes

STANDARD	MEASURE
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Service Standards:	
The client's eligibility for Ryan White Part B services is determined or the client is in the process of obtaining eligibility before service is initiated.	Documentation of the client's eligibility or that the eligibility process has been initiated is present in the client's record.
A referral by a Ryan White Part B provider is made for initiation of health education/risk reduction.	Documentation of the referral or form is present in the client's record.
All information provided by the client is confidential. It will not be released to anyone without client permission except as permitted or required by law.	Documentation of confidentiality assurances is signed and dated by both staff and client and is present in the client's record.
Intake:	
An intake is initiated which includes the collection of demographic information, client's specific needs and determination of program eligibility.	Documentation of the intake is present in the client's record, signed and dated.
Assessment:	
The client is assessed to determine their specific HIV/AIDS prevention needs.	Documentation of the assessment, including any tools utilized in the assessment, is present in the client's record, signed and dated.

Individualized HE/RR Plan Development:	
In collaboration with the client, an individualized HE/RR plan is developed. Client is offered a copy of the plan.	Documentation of the HE/RR plan is present in the client's record, signed and dated by both the client and the health educator. If client declines copy, documentation of such is present in the client's record.
The HE/RR plan must contain the following: A. Goal B. Expected outcome C. Actions taken to achieve each goal D. Person responsible for completing each action E. Target date for completion of each action F. Results of each action	Documentation of HE/RR plan with the appropriate steps is present in the client's record, signed and dated.
Interim progress notes will assess effectiveness of education, client response to education, and progress toward (or lack of) established goals.	Documentation of the interim progress notes assessing effectiveness of education, client response to education, and progress toward (or lack of) established goals is present in the client's record, signed and dated.
The health educator will evaluate client success in maintaining safer choices every 90 days .	Documentation of the evaluation of the client's success in maintaining safer choices every 90 days is present in the client's record, signed and dated.
Reassessment:	
The HE/RR plan will be re-assessed at a minimum of every 90 days to determine if goals are being met and to identify any new needs. The client is offered a copy of the plan.	Documentation of the re-assessment of the HE/RR plan every 90 days is present in the client's record, signed and dated by both the health educator and client.

Discharge:	
The health educator and client collaborate on a discharge plan once goals have been met and behavior maintained. The client may be discharged for the following: A. client is lost to follow up B. client fails to provide updated documentation of eligibility status after three (3) documented attempts to by health educator/designated staff C. client action(s) put the agency, staff or other clients at risk D. client fails to maintain contact with the health educator for a period of three months despite three (3) documented attempts to contact client E. client request F. client death	Documentation of the discharge plan and reason for discharge is present in the client's record, signed and dated.
Referrals:	
If the needs of the client are beyond the scope of the health educator, an appropriate referral is made (e.g. mental health provider, substance abuse treatment). The health educator will track the referral to assess outcomes.	Documentation of the referral and tracking of the referral for other professional services are present in the client's record, signed and dated.
The client is appropriately referred to other HIV services as needed.	Documentation of any referral is present in the client's record.
The health educator and client collaborate on a discharge plan once goals have been met and behavior maintained.	Documentation of the discharge is present in the client's record.
Qualifications:	
A Master's/Bachelor's degree in a Human Service field or a Registered Nurse or a Master's /Bachelor's degree in a non-Human Service field, 2 years HIV experience or a 2 year associates degree in a Human Service field and four years HIV experience.	Documentation of education and resume is in the health educator's personnel file and available for review.

Training:	
<p>All health educators must complete minimum training requirements within 1 year of hire:</p> <ol style="list-style-type: none"> 1) HIV/AIDS: prevention and clinical issues 2) Sexually transmitted diseases: prevention and clinical issues 3) Tuberculosis: prevention and clinical issues 4) Viral hepatitis: prevention and clinical issues 5) Current laws, regulations and policies related to HIV and STDs. 	<p>Documentation of the minimum training requirements is present in the health educator's personnel file and available for review.</p>
Annual Training Requirement	
<p>All health educators must complete 12 hours of continuing education in HIV/AIDS annually.</p>	<p>Documentation of completion of the continuing education must be kept in health educator's personnel file and available for review.</p>
Clinical Supervision	
<p>Each health educator will receive appropriate supervision on a regular on-going basis by a supervisor with a minimum of a Master's/Bachelor's degree in a Human Service field or a Registered Nurse or a Master's/Bachelor's degree in a non-Human Service field and 2 year of HIV experience plus 2 years of supervisory experience.</p>	<p>Documentation of the supervisor's credentials is on file. Documentation of the regular on-going meetings to include date, people in attendance, agenda of the meeting, if any outcome measures are reached and the signature of the supervisor is also on file and available for review.</p>