

RYAN WHITE PART B PEER REVIEW 2009-2010

Virginia Department of Health

Division of Disease Prevention

HIV Care Services

Chart Review

Health Education/Risk Reduction (HE/RR)

ID#

	YES	NO	NA	COMMENTS
1. Referral				
<ul style="list-style-type: none">• Is the referral in the client record from a Ryan White Part B provider?				
2. Intake				
<ul style="list-style-type: none">• Is there documentation of an intake collecting demographic information and determining program eligibility?				
3. Assessment				
<ul style="list-style-type: none">• Is there a completed assessment present in the client's record, signed and dated?				
<ul style="list-style-type: none">• Does the assessment determine the specific need of the client?				
4. Individualized HE/RR Plan Development				

	YES	NO	NA	COMMENTTS
<ul style="list-style-type: none"> Is there documentation in the client's record, signed and dated, that the health educator and the client developed the HE/RR plan together? 				
<ul style="list-style-type: none"> Is the HE/RR plan present in the client record, signed and dated by the health educator and the client? 				
<ul style="list-style-type: none"> Does the HE/RR plan contain measurable goals to remedy the problem? 				
<ul style="list-style-type: none"> Does the HE/RR plan contain expected outcomes? 				
<ul style="list-style-type: none"> Does the HE/RR plan list the actions taken to achieve each goal? 				
<ul style="list-style-type: none"> Does the HE/RR plan have target dates for completion of each action? 				
<ul style="list-style-type: none"> Does the HE/RR plan document progress or lack of progress toward obtaining goals? 				

	YES	NO	NA	COMMENTS
<ul style="list-style-type: none"> Are there interim progress notes assessing the effectiveness of the education, client response to education, progress toward (or lack of) established goals present in the client's record, signed and dated? 				
<ul style="list-style-type: none"> Is there an evaluation every 90 days of the client's success in maintaining safer choices present in the client's record, signed and dated? 				
5. Reassessment				
<ul style="list-style-type: none"> Is there documentation that the HE/RR plan was reassessed at least every 90 days present in the client's record, signed and dated? 				
<ul style="list-style-type: none"> Is the reassessed HE/RR plan present in the record signed and dated by both the client and the health educator? 				

	YES	NO	NA	COMMENTS
6. Discharge				
<ul style="list-style-type: none"> Is there documentation present in the client's record, signed and dated that the client no longer requires HE/RR services? 				
<ul style="list-style-type: none"> When all goals and issues have been met and no new issues have been identified, is there documentation present in the client's record, signed and dated, of initiation of discharge planning in collaboration with the client? 				
<ul style="list-style-type: none"> Is there a discharge summary present in the client's record, signed and dated? 				
7. Referrals				
<ul style="list-style-type: none"> Is there documentation of all referrals made and tracked for outcomes present in the client's record, signed and dated? 				

Reviewer _____ Date _____

Subcontractor staff(s) interviewed _____