

RYAN WHITE PART B PEER REVIEW 2009-2010

Virginia Department of Health

Division of Disease Prevention

HIV Care Services

Chart Review

Treatment Adherence Services

ID#

	YES	NO	NA	COMMENTS
1. Is there referral in the client record from a Ryan White Part B provider?				
2. Screening:				
Is there documentation that a screening was done within 72 hour (three working days) of client's initial contact with the agency?				
3. Intake				
<ul style="list-style-type: none"> Was the intake completed and documented within 10 working days of initial contact? 				
4. Assessment				
<ul style="list-style-type: none"> Was the treatment adherence assessment completed within 30 days of intake? 				
<ul style="list-style-type: none"> If time line is not met does the client's record contain documentation of why the 30 days was not met? 				
5. Treatment Adherence Plan Development				

	YES	NO	NA	COMMENTS
<ul style="list-style-type: none"> Is there documentation that the treatment adherence professional and the client developed the support plan together? 				
<ul style="list-style-type: none"> Is the treatment adherence plan present in the client record, signed and dated by the support counselor and the client? 				
<ul style="list-style-type: none"> Has the treatment adherence plan been completed within 15 days after assessment? 				
<ul style="list-style-type: none"> Is there documentation that a copy of the treatment adherence plan was offered to the client? 				
<ul style="list-style-type: none"> Does the support plan identify problem(s)? 				
<ul style="list-style-type: none"> Does the treatment adherence plan include goals to remedy the problem? 				
<ul style="list-style-type: none"> Does the treatment adherence plan identify measurable goals to increase treatment adherence? 				

	YES	NO	NA	COMMENTS
<ul style="list-style-type: none"> Does the treatment adherence plan have target dates for completion of the goals? 				
<ul style="list-style-type: none"> Does the treatment adherence plan identify who is responsible for each of the action steps? 				
<ul style="list-style-type: none"> Do the progress notes document progress or lack of progress toward obtaining goals? 				
<ul style="list-style-type: none"> Do the progress notes include type and frequency of contacts? 				
<ul style="list-style-type: none"> Are all sessions documented, signed and dated by the support counselor? 				
6. Reassessment				
<ul style="list-style-type: none"> Is the treatment plan reassessed at least every 90 days? 				
<ul style="list-style-type: none"> Have both the client and the treatment adherence professional signed and dated the revised treatment plan? 				

	YES	NO	NA	COMMENTS
7. Discharge				
<ul style="list-style-type: none"> Does the client no longer require treatment adherence services? 				
Is there a discharge summary present in the client's record?				

Reviewer: _____ Date: _____

Subcontractor staff(s) interviewed: _____