

TA Request Tracking Log – FAQ

Acuity Index:

Question: How and how often to complete the form?

Answer: The Acuity Index should be completed every 6 months.

Question: Which sections apply to my program? – Transitional Living Program (Scattered-Site).

Answer: All sections apply unless you are a Shelter or Skilled Nursing Facility. These agencies are exempted from Housing section page 1 and corresponding interpretations on page 6.

Question: How do I score each section?

Answer: The scale ranges from a 0, representing low self-sufficiency and a lack of independence, to a 3, representing the highest level of self-sufficiency and independence. Sections scores are not averaged together, but taken section-by-section.

Question: What is the value of each level?

Answer: The Acuity Index categorizes tenant self-sufficiency and independence on a four-point scale. The scale ranges from a 0, representing low self-sufficiency and independence, to a 3, representing the highest level.

Question: When to defer a goal?

Answer: Goals can be either active – something that a tenant is working on currently, or deferred – a goal that is identified as important but will be worked on later. Sometimes a service plan goal will address two sections at the same time. Deferred goals do not have to be recorded on the service plan, but MUST be noted on the Acuity Index. Active goals should be identified on the Acuity Index and the Service Plan.

Question: How to calculate the points in each section?

Answer: Add the numbers in each section and put in the subtotal section (box), transfer the subtotal numbers from each section and copy to page 6 “Current Level on this Assessment” column. Follow the instruction at the bottom on page 6 “Interpretation” please note: there is NO aggregated scoring for the Acuity Index.

Question: Our tenants come to us with the initial HIV verification which is where we are able to get the CD4 count etc. We do not require tenants to bring in any paperwork after that initial verification. With the new Acuity Index, do we have to start requiring that information every 6 months? If we don't have it, will we be penalized come audit time?

Answer: An initial verification of HIV status is required only for the first Acuity. You will then use client lab reports to gather the CD4 and viral load information to fill out the Acuity Index every six months. You will be penalized if you don't have this information, but if you encounter extenuating circumstances keeping you from getting the information it should be noted in the comments section of the Acuity Index so the reviewers see that you have been tracking these numbers and can score accordingly. If a client is getting their bloodwork done on an alternate schedule, account for the discrepancy in timeframe in the comments section of the Acuity Index.

TA Request Tracking Log – FAQ

Standards of Care:

(Domain 1A)

Program Occupancy Rate during the year. (Score of 5 indicates occupancy did not fall below 100% for a period of >2 consecutive months.)

Question: Due to deaths, exits to incarceration, and behavioral incidents, an agency has had low occupancy this year. Will they be penalized given the circumstances?

Answer: If the occupancy is not being fulfilled, then the agency should be in contact with their DOH contractor to renegotiate contract. ACT will serve to help come up with a corrective plan. This information is part of the pre-review materials. This is regardless of the circumstances.

(Domain 1D)

Housing and services are for individuals or head of household who are homeless, or at-risk of homelessness, and have an HIV or AIDS diagnosis.

Question: What documentation is necessary to verify homelessness?

Answer: Documentation depends on what the source is. HUD says verification has to be from a homeless outreach worker. If verification is from a shelter there should be a letter on agency letterhead.

| | | |
|--|--|---|
| <p>Persons living on the street or place not intended for human habitation. OR Persons in an emergency shelter for homeless persons OR Persons residing in a hotel or motel paid for by charity or government agency.</p> | <ul style="list-style-type: none"> <input type="checkbox"/> Written observation by an outreach worker verifying that the household is homeless OR <input type="checkbox"/> Written referral by another housing or service provider verifying that the household is homeless OR <input type="checkbox"/> HMIS printout/s from outreach program certifying that the client is homeless over a specified time period | <ul style="list-style-type: none"> <input type="checkbox"/> A written statement signed and dated by the participant certifying the household was living on the streets or in the shelters for a specified period of time AND <input type="checkbox"/> Evidence of efforts made to obtain third party evidence |
|--|--|---|

(Domain 2C)

There are clearly defined grievance procedures that are communicated to clients...

Question: Does the grievance procedure need to be signed yearly by the clients?

Answer: Grievance policy needs to be signed yearly even if the policy does not change. Clients should receive a handbook every year.

TA Request Tracking Log – FAQ

(Domain 4C)

Service plan goals are based on the results of the assessment and acuity index and/or person-centered identified goals.

Question: Can a consumer opt out of the Acuity Index? Since we are truly consumer controlled and consumer directed, our consumers have the right to determine their own goals which may or may not align with an Acuity Index. Are there certain sections that don't apply to scattered site programs?

Answer: As long as a client is receiving financial assistance they should be encouraged to participate in service planning (case management). In the event a client opts out of the Acuity Index section "HIV Specific Health & Wellness" Page 5 "HIV Progression" must be completed.

(Domain 5A):

Percent of Clients who maintained or increased their income from all sources during the year.

Question: So is an agency penalized if a consumer's income goes down? Perhaps through a reduction of hours? Obviously some of these things are beyond our control.

Answer: No, an agency will not be penalized for increase or decreases in client income. It should be recorded in the comment section of the Acuity Index why the change has occurred.

(Domain 6B):

Of the clients who have been in facility for a year, percent of Clients who have remained in supportive housing for more than one year. (Discharge occurs more than 12 months after intake).(For shelters circle 5 if not applicable)

Question: Is client retention a good thing or a bad thing? Example. We transition a consumer to permanent housing in 9 months. It appears that would lower our score since they didn't remain on our program for twelve months.

Answer: This is actually a good thing and is supported by our DOH funders. Programs will not be penalized for this but it should be noted in the comment section, the program's philosophy on transitioning clients to permanent housing.

Question: What is our agency responsible for regarding DOH's role in the review process? Does ACT's review satisfy all DOH requirements?

Answer: ACT's review does NOT satisfy all DOH requirements. DOH & has a separate review process for their contract compliance audit, which could potentially be conducted at the same time as the ACT audit. The funder will be in contact with the agency to alert them whether or not they will be joining the ACT audit.

Domain 7(C):

Progress toward meeting service plan goals and/or person-centered identified goals is documented at least 2 times per month based on acuity index results.

Question: Is the assessment and Acuity index completed every six months?

Answer: Yes

TA Request Tracking Log – FAQ

7(D): Staffing meets the current caseload requirements.

Question: What is the current caseload requirement?

Answer: See your contract for this information, it varies from program to program.

Question: Since we are scattered-site we do not provide 24 hour on call staff.

Answer: This calls for a policy not necessary actual staffing. For instance: “Due to the nature of our program (Scattered Site) we do not have 24 hour on call staff however, it is our practice to review all emails, calls or reports made to our office on a daily basis during business hours.”

(Domain 6A): Percent of clients who remain in housing or exited to housing – (to non-homelessness).

Question: What is the discharge procedure for clients who leave the program for jail/prison? Are they considered to be exiting to homelessness? Is this considered non-homelessness?

Answer: Jail/Prison is considered NON-homelessness.

Question: What is the policy regarding the “two year limit” that was previously in place placing a timeframe on transitional housing. Is there still this restriction in place, and will it be discussed during the review?

Answer: The “two year limit” is a timeframe that is not applicable to all agencies and is particular to an agency’s contract negotiation with their funders. If the limit is not in the contract, it is not applicable to the agency.

Question: Regarding rejected applications (pg. 1 of the standards manual): Those clients who have been rejected from have therefore not filled out a release of information form, and their information can’t be released to the auditor as this would be a breach of confidentiality. With this in mind, how will the agency be able to provide the rejected applications? What is the grievance policy for rejected applications supposed to look like? Is this a letter, a form?

Answer: ACT can have access to rejected applications, but all identifying information must be removed. This can be either a letter or a form indicating basic information for rejection and outlining the procedure for submitting a grievance to the agency. This should be the same policy outlined in the agency manual.

Question: Are staff interviews for ALL staff (including 2nd or 3rd shift?)

Answer: There will only be two staff interviews, one for a middle manager and a case manager.

Question: In their client manual, an agency reserves the right to discharge clients if they don’t participate in services. According to the standards, they would be penalized for this. (pg. 7 of review manual).

Answer: Your agency will be marked with an N/A by the reviewer in this section. This is not a point value section of the standards, and because it is in adherence with your policy, (and you do have a policy in place) you will not be penalized.