

**INDIANA STATE DEPARTMENT OF HEALTH (ISDH)
HIV SERVICES PROGRAM (HSP)
HSP Procedure 18-01: Site Visit Monitoring**

Purpose: To assure subrecipient compliance with federal, state, and local legislative and programmatic requirements and to meet the National Monitoring Standards developed by the Division of State HIV/AIDS Programs (DSHAP) within Health Resources and Services Administration (HRSA) HIV/AIDS Bureau (HAB). The standards are prescriptive regarding the frequency (annually) and kind of recipient monitoring activities of subrecipient agencies and services (compliance). The principal purpose for describing and outlining the process to be followed prior, during, and after a monitoring site visit is to guarantee a standardized and transparent process for the agencies as well as the HIV STD Viral Hepatitis Division.

Procedures:

I. Planning Process

A. Scheduling Site Visits:

In April of each year, the monitoring staff will meet with the Ryan White Service Director to review sub-recipient risk using the annual risk assessment tool that was completed prior to award (Attachment A). Results will be compiled, assigning priority to those agencies with higher risk scores. The annual site visit schedule will be developed with the goal of visiting agencies with higher risk earlier in the year.

B. Steps

Once the visit schedule is established, the monitoring staff can proceed to notify the agencies of the visit dates. Notification will be sent to the agencies at least four weeks prior to the visit. The notification can be completed by call, email, letter or fax but must include the names of the ISDH monitoring team, the date of the visit, a copy of the monitoring tools, and a list of the documents for review.

II. Monitoring Process

A. Site Visit Review Team

**INDIANA STATE DEPARTMENT OF HEALTH (ISDH)
HIV SERVICES PROGRAM (HSP)
HSP Procedure 18-01: Site Visit Monitoring**

At a minimum, the monitoring team should include one fiscal reviewer and one program reviewer. The inclusion of clinical reviewer or quality management improvement staff to perform chart reviews as part of the monitoring visit is optional. A team leader will be identified for each site visit cycle.

B. Conference Call

A thirty minute conference call between ISDH and the sub-recipient will be scheduled no later than two weeks prior to the visit. The calls will verify the date, purpose of the site visit, review the site visit agenda and to answer questions about the process or requested documents. The following stake holders should participate on the call:

- ISDH: the ISDH monitoring team conducting the visit and Ryan White Part B Service Director of the HIV STD Viral Hepatitis Division.
- Sub-recipient: the sub-recipient's Executive Director, HIV Program supervisor, a medical or social services representative, and a fiscal representative.

The team leader of the monitoring team should identify the visit as a routine annual compliance monitoring visit and, if necessary, identify any major issues to be addressed during the visit.

Issues to be discussed during the thirty (30) minute call:

1. Confirm site visit dates.
2. Explain the purpose of the site visit.
3. Explain the roles of the review team members.
4. Verify receipt by subrecipient of the letter announcing the visit, monitoring staff contact information, monitoring tools, evaluation (attachment B), site visit agenda format (attachment C), documents list (attachment D).
5. Discuss the tentative agenda, making adjustments as needed.
6. Determine if there are multiple sites to be visited (i.e. Administration offices and case manager services in different facilities). Discuss transportation logistics between sites.

**INDIANA STATE DEPARTMENT OF HEALTH (ISDH)
HIV SERVICES PROGRAM (HSP)
HSP Procedure 18-01: Site Visit Monitoring**

7. Identify who should attend the entrance and exit conference.
8. Confirm meeting with HIV positive consumers (if one is going to be done).
Discuss logistics, such as location, times and whether food will be provided.
9. Discuss client chart review process, if applicable.

C. Annual Site Visit

The duration of the site visit will depend on the complexity of the organization and if contracted services are singular or multifaceted (i.e. a small case management organization versus a large hospital outpatient clinic). Monitoring visits are structured to be able to evaluate the organization systems, policy/procedure manuals and charts, and to test for compliance with legislative and programmatic requirements. Please see Site Visit Agenda Template (Attachment C).

- a. Entrance Meeting: The visit will start with an Entrance Meeting. There will be introductions, and the team lead will re-state the purpose of the meeting. The sub-recipient will provide a 1-hour presentation about the agency, how RWHAP Part B services have been implemented, and any success and challenges of the Part B Program.
- b. Site Visit and Monitoring Activities: Refer to Site Visit Agenda Template. It is important to incorporate staff interviews in this process, as well as document and chart review. Staff interviews are a useful way of verifying the implementation of the policies and procedures, recognizing deviations from the established norms, answering policy or procedural questions, and identifying technical assistance opportunities. Staff can include supervisors, managers and front-line staff as appropriate.
- c. Exit Meeting: During the Exit Meeting, the ISDH review team will inform the subrecipient key staff of the compliance issues and/or opportunities for

**INDIANA STATE DEPARTMENT OF HEALTH (ISDH)
HIV SERVICES PROGRAM (HSP)
HSP Procedure 18-01: Site Visit Monitoring**

improvement identified during the visit. At that time, the review team will also provide recommendations for how to develop or improve systems that are compliant with contractual obligations and legislative requirements. The review team should strive to communicate to the recipient the findings and recommendations to be included in the final report.

D. Follow Up Visits

ISDH review team will notify the sub-recipient that follow-up visits may occur under certain circumstances. Follow-up visits will be scheduled as a response to:

1. Subrecipient delays in meeting corrective action plan activities and deadlines (if applicable).
2. Significant unresolved consumer complaints identified during visit: (i.e., barriers to care, denied services for non-payment of bill, provider instituting a waiting list, etc.).
3. Significant unresolved sub-recipient concerns (i.e., Part B funded staff have not received a payroll check for two months, agency cannot justify expenses, fiscal review indicates possible mismanagement of funds, etc.).
4. Audit findings which question the financial stability and sustainability of the agency.
5. Need for targeted technical assistance.

III. *Monitoring Reports*

A. Report

After the visit, the reviewers must prepare a preliminary report (Attachment E) which will be presented during a full staff meeting. The discussion should prioritize the severity of the findings, recommend timelines for corrective actions based on the severity of the findings, and if there should be any follow-up visits. Once the report is approved by ISDH, it is sent to the subrecipient. Reports must be provided to the sub-recipient no later than 45 days after the site visit. In the event that there are fiscal findings that require the expertise of ISDH legal or audit

**INDIANA STATE DEPARTMENT OF HEALTH (ISDH)
HIV SERVICES PROGRAM (HSP)
HSP Procedure 18-01: Site Visit Monitoring**

department, the ISDH Division Deputy Director will make the decision on whether to refer the case or to end the contract.

IV. Corrective Action Plan

The sub-recipient has 10 working days after receiving the final report to submit a corrective action plan to the ISDH contract monitor, responding to the legislative and programmatic findings as outlined in the corrective action (attachment F).

The Recipient monitoring staff will have seven (7) working days to approve or modify the action plan after discussions with the subrecipient.

Example: The subrecipient does not have fiscal policies and procedures. The sub-recipient indicates they will be developed within 6 months in the Corrective Action Plan. ISDH may provide technical assistance through an expert or peer (another agency) to assist and shorten the target completion date.

Sub-recipients that do not indicate progress in resolving legislative or programmatic findings for more than a year will be considered non-compliant with the implementation of the Corrective Action Plan.

Example:

- Legislative Finding: Payor of last resort finding for not billing billable services.
- Plan: Sub-recipient is to purchase billing U
- Assessment: Not compliant with the completion of action plan.

The Monitoring staff will discuss with Deputy Director and/or Ryan White Service Director the completion delays of more than a year and Deputy Director and/or Ryan White Service Director will decide whether to apply any punitive measures for not executing the action plan compliance such as adjusting the sub-recipient risk assessment or adjusting funding because of the risk of providing non allowable services.

VI. Time Sensitive Calendar Guide

**INDIANA STATE DEPARTMENT OF HEALTH (ISDH)
HIV SERVICES PROGRAM (HSP)
HSP Procedure 18-01: Site Visit Monitoring**

Depending on the size and complexity of the subrecipient agency, the monitoring process cycle should not be longer than 100 working days from the day the agency is notified of the site visit. The working schedule can follow the following calendar:

Day 1: Notice of monitoring visit. The team has send the announcement of the site visit and the conference call date

Day 15: Beginning of monitoring process. The monitoring process will start with participation in the conference call. Recipient staff will clearly articulate the monitoring process phases and expectations. At the same time the funded agency will have an opportunity to ask procedural questions, agree to the visit starting date and time and voice any concerns or barriers that the process might encounter. (Example: the unexpected long term absence of one of the key members of the HIV Program team.)

Day 30: Site Visit. Reviewers will be onsite from 2 to 5 days and that the process for gathering all the necessary information, the visit and the report writing will not take more than ten working days.

Day 41: Discussion of Draft Report. By this day the monitoring staff should have completed a detailed draft report inclusive of narrative, observation, areas of improvement and recommendations. The draft report is discussed during the contract monitor staff meeting, and the final draft will be submitted for Deputy Director and Ryan White Service Director for approval.

Day 48: Submission of Report to Subrecipient. On the 45th day of working in the monitoring process, a site visit report will be mailed or hand-delivered to the administration of the funded sub-recipient, copied to the Deputy Director and Ryan White Service Director.

Day 59 : Subrecipient Corrective Action Plan: The subrecipient will have ten (10) working days to respond in writing with a Corrective Action Plan. For each legislative and programmatic finding, written explanation of the corrective action with a timeline is expected. When the corrective action completed, documentation is to be submitted to ISDH (Example: Conflict of

**INDIANA STATE DEPARTMENT OF HEALTH (ISDH)
HIV SERVICES PROGRAM (HSP)
HSP Procedure 18-01: Site Visit Monitoring**

Interest Policy related to procurement did not exist. The sub-recipient explains what will occur (policy to be developed), by when it will be completed (Within 30 days), and then submits the final policy to ISDH as documentation of completion).

A response and timeframe for each corrective action is required for all legislative and programmatic findings. Responses are not required to recommendations for best practices or improvements, but if the agency adopts the recommendation the implementation should be reported to ISDH.

Day 96 : Follow up visits. ISDH may conduct sub-recipient follow up visits after three months to confirm corrective actions were implemented, to provide technical assistance if corrective actions have been delayed, or in response to specific identified issues (i.e., concerns with management of funds). The severity and number of compliance problems will guide the length and focus of the follow-up visit.

ATTACHMENTS

- A. ISDH Pre-Award Risk Assessment - Available Upon Request
- B. Site Visit Evaluation Form - Available Upon Request
- C. Sample Monitoring Site Visit Agenda - Available Upon Request
- D. Documents to Review for Monitoring Visit - Available Upon Request
- E. Fiscal Monitoring Tool - Available Upon Request
- F. Administrative/Programmatic Monitoring Tool - Available Upon Request