

**HIV Health Services Planning Council
Sacramento TGA**

Policy and Procedure Manual

Section 7 - Administrative Assessment Committee

SECTION	SECTION / POLICY TITLE	CURRENT VERSION	PREVIOUS REVISIONS
7	ADMINISTRATIVE ASSESSMENT COMMITTEE		
	AdAC 01 – Administrative Assessment Committee	08/24/22	10/28/20, 12/13/17, 06/27/11, 2/23/05, 6/23/04, 6/96

HIV Health Services Planning Council Sacramento TGA

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Subject: Administrative Assessment **No.:** AdAC 01
Date Approved: 6/96
Date Revised: 08/24/22
Date Reviewed: 08/24/22

Background: Ryan White CARE Act, Part A, Section 2602 (b) (4) (c) requires that Planning Council's assess the efficiency and effectiveness of administrative mechanisms.

Policy: The HIV Health Services Planning Council shall meet the Ryan White CARE Act's legislative mandate that Planning Councils "assess the efficiency and effectiveness of the administrative mechanisms for rapidly disbursing CARE Act funds to the areas of greatest need within the transitional grant area (TGA)."

In fulfilling this mandate, the Council's Administrative Assessment Committee (AdAC) and the Recipient (Sacramento County Department of Health Services) will work together to continually improve the administrative processes that affect the quality of care and efficiency of the CARE Program's service delivery system.

Procedure

1. Liaison: The AdAC will serve as a liaison between the Planning Council and the Recipient to improve communication and collaboration regarding the assessment, development and implementation of administrative mechanisms for the TGA. The AdAC will meet bi-annually (twice a year), at minimum, with the Recipient.

2. Annual Administrative Assessment: The AdAC will conduct an annual assessment of Recipient administrative mechanisms with the intent of providing feedback and recommendations to the Council and to the Recipient to continually improve such administrative policies and procedures.

- a. Scoring Tool:** A scoring tool will be used to provide objective ratings and quantifiable feedback regarding predetermined standards that are defined by the AdAC with input from the Recipient.
- b. Documentation Log:** A documentation log will be developed to provide a listing of acceptable material that may be used to document the fulfillment of each standard on the scoring tool. The listing of acceptable material will be jointly developed by AdAC and the Recipient. Submittal of information will be recorded in the documentation log throughout the year by Planning Council staff.
- c. Quantitative analysis:** The standards on the scoring tool are written to measure Recipient compliance with outcomes that can be measured in quantifiable terms. These outcome standards are written to answer the following questions: “was the task accomplished; to what extent was the task accomplished?” Recipient compliance with each standard is measured from an outcome perspective using the following scale:

Rating	Compliance Measure	Description of Rating
+	<i>Standard Met and Exceeded</i>	<i>The intent of the standard is consistently met and exceeded, and the processes are not in need of significant improvement.</i>
√	<i>Standard Met at Minimum</i>	<i>The intent of the standard is primarily met, but the processes could still be improved. Recommendations could be provided.</i>
-	<i>Standard Not Met</i>	<i>The intent of the standard is primarily not met, and the processes should be given the majority of the resources for improvement. Recommendations should be provided.</i>

- d. Qualitative analysis:** In addition to the quantitative analysis of outcome measures, a narrative summary will be included in the assessment report to provide a qualitative analysis of the processes used to address each standard. This qualitative analysis will answer the following questions: “how was the task accomplished; were the processes used efficient, were the processes fair, were the processes comprehensive, could the processes be improved?” The qualitative analysis will be summarized in the narrative report under the following sections for each Rating Category: (a) strengths, (b) weaknesses, (c) external factors, and (d) comments/recommendations for improvement.
- e. Rating Categories:** The Rating Categories for which standards are defined include:
 1. Procurement Process

2. Fiscal Monitoring
3. Program Monitoring
4. Tracking Systems
5. Contract Development
6. Allocation, Priority Setting and Reallocation
7. Communication and Reporting
8. Barriers and Concerns
9. Timeliness
10. Flexibility

f. Provider input: An anonymous provider survey will be utilized to solicit service provider perceptions of quality and efficiency of administrative mechanisms. Provider survey questions shall be phrased to allow the same quantifiable rating scale to be used as is used for the quantifiable analysis of the scoring tool.

When available, provider survey results will be considered by review panel members as secondary information for the purpose of completing the administrative assessment. A summary of provider feedback will be included as an attachment to the final Administrative Assessment Report.

g. Methodology for Annual Administrative Assessment is specific and includes the following components:

- 3. Training of Review Panel (AdAC):** A comprehensive training will be provided to all review panel members at least one week prior to the assessment.
- 4. Recipient Preparation:** The completed (or in progress) documentation log will be provided to the Recipient at least one month prior to the assessment, and the Scoring Tool will be provided to the Recipient at least two weeks prior to the assessment so that the Recipient has time to organize and label all documents to be reviewed during the assessment.
- 5. Roles and responsibilities:** The roles and responsibilities of the Review Panel members, consultant, Council staff and Recipient staff during the assessment process will be clearly defined:
 - The Review Panel members' roles are to review all documentation as provided by the Recipient and to determine ratings as delineated by the Scoring Tool.

- The Recipient staff roles are to provide documentation to determine compliance with standards and to answer all questions as presented by Review Panel members.
- The consultant and/or Council staff roles are to facilitate and record the assessment process and to answer any questions as presented by the Recipient or Review Panel members.
- During the assessment, only the Review Panel members are to render any opinions regarding F/AA compliance with the standards.

- 6. Administrative Assessment Report:** The consultant and/or Council staff will draft a summary report regarding the findings of the annual assessment, which must be approved by the Review Panel prior to submission to the Recipient. The findings in the report will include ratings regarding Recipient compliance with each standard, as well as a narrative summary of strengths, weaknesses, external factors, comments and recommendations for improvement.
- 7. Recipient Response and Plan of Correction:** The Recipient will have thirty days to respond to the Review Panel's summary report by writing a Response and Plan of Correction for each deficiency as noted in the assessment report. If no response is received within 30 days, the score and report will stand and be forwarded on to the Council for approval.
- 8. Revisions to Assessment Report:** The Recipient Response and Plan of Correction will be submitted to the Review Panel for review. Any final revisions or corrections to the Annual Administrative Assessment Report will then be made as determined by the Review Panel.
- 9. Submission of Final Report:** The Review Panel's Final Annual Assessment Report and Recipient Final Response and Plan of Correction will be submitted to the Planning Council and to the HIV/AIDS Bureau (HAB) within the timeframe specified by HAB.
- 10. Critique of Assessment Process:** Upon submission of the final report, the Committee will evaluate and revise all procedures used throughout the administrative assessment process, including: member training, Recipient preparation, committee review, and timelines to ensure a fair, consistent evaluation.

All tools, including the scoring tool and provider survey, will be evaluated and revised on an annual basis to ensure clear, accurate, and comprehensive scoring standards.

- 11. Bi-annual Monitoring of Recipient Plan of Correction:** The AdAC will assess the implementation of the Recipient Plan of Correction on a bi-annual basis to ensure ongoing improvement of administrative mechanisms. The Bi-annual Monitoring Form will be developed by the consultant and/or staff upon completion of the Review Panel's Annual Administrative Assessment Report and the Recipient Response and Plan of Correction. Bi-annual Progress Reports will be approved by the AdAC and submitted to the Executive Committee of the Council for follow up as needed.

- 12. Additional Assessment and Monitoring Activities:** As the Planning Council, AdAC and/or Recipient deem necessary, additional assessment and/or monitoring activities will be developed and implemented to ensure ongoing improvement in Recipient administrative mechanisms. As new assessment and monitoring activities are developed, each will be included in these Administrative Assessment policies and procedures.

Approved: 
Richard Benavidez, Chair

Date: 08/24/22