**Michigan Local Public Health Accreditation Program**

**Section VII: HIV/AIDS & STD**

**Program Companion Guide to**

**Minimum Program Requirements (MPRs)**

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**MPR 1**

Provide and/or refer clients for HIV and STD screening and treatment, regardless of client ability to pay.

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**Indicator 1.1**

Provide HIV and STD screening and treatment services in accordance with the Michigan Public Health Code and Michigan Department of Health and Human Services (MDHHS) accreditation and current quality assurance standards.

**Local Health Department (LHD) staff should have on hand:**

- Protocol and procedures for provision of HIV and STD screening and clinical services.
- Current training records, orientation checklists, or sign-in sheets showing that staff have been trained in the provision of HIV and STD screening and clinical services.
- Examples of outreach, recruitment, or promotional activities for the provision of HIV and STD screening and treatment. Examples may include press releases, flyers, posters, billboards, and/or social media posts.
- Examples of risk assessment forms in use.

**MDHHS staff will verify in advance:**

- LHD website for HIV and STD screening and treatment includes hours, information about tests offered, and information about test costs.
- EvalWeb test forms detailing, at minimum, treatment provided, risk reduction counseling, and referral services.

**Special Recognition:**

**Bold formatting signifies a special recognition category that may be converted to an indicator in future cycles.**

- LHD has innovative tools, with regard to LHD resources, to help with outreach, recruitment, or promotional activities.
- LHD provides targeted high risk population outreach, recruitment, or promotional activities.
- LHD promotes and performs both oral and rectal screening for gonorrhea and chlamydia.
- LHD promotes and/or offers the use of the Human Papillomavirus (HPV) vaccine.
- LHD promotes use of pre-exposure prophylaxis (PrEP).
- LHD maintains MDHHS policy around non-occupational post-exposure prophylaxis (nPEP) and has a plan for accessing nPEP, if needed.
- LHD meets or exceeds completeness of required variables for negative cases (e.g. risk profile) by 80% or more, as evaluated by EvalWeb.
- LHD has signed up for the Laboratory Management System (LMS).

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**Indicator 1.2**

Provide court-ordered HIV and STD counseling, testing and referral services and victim notification activities in accordance with the Michigan Public Health Code: Sec. 333.5129 and MDHHS guidance.

**LHD staff should have on hand:**

- Protocol and procedures around court-ordered HIV and STD counseling, testing, and referral services.
- Current training records, orientation checklists, or sign-in sheets showing that staff have been trained in court ordered HIV and STD counseling, testing, and referral services.

**MDHHS staff will verify in advance:**

n/a

**Special Recognition:**

n/a

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For technical assistance, please contact Irda Kape at 517-241-4531 or Kapei@michigan.gov
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MPR 2
Perform activities necessary to control the spread of HIV and STD infection; conduct reporting and follow-up of HIV, AIDS, and STD cases.

Indicator 2.1
Reporting of HIV, AIDS, and STD cases are in compliance with the Michigan Communicable Disease Rules and the Michigan Public Health Code and in accordance with current MDHHS policy.

LHD staff should have on hand:
- Policy around reporting and follow-up for HIV, AIDS, and STD cases.
- Current training records, orientation checklists, or sign-in sheets showing that staff have been trained in case reporting.
- Copy of current HIV case report form in use.
- Examples of education or technical assistance to physicians, laboratories, and other providers (Memorandums of Understanding [MOUs], Memorandums of Agreement [MOAs], blast faxes, email, or other communication).
- EvalWeb data feedback report and provider feedback report.

MDHHS staff will verify in advance:
- Are submitted case reports complete with the appropriate information? Case report forms will be pulled in advance.
- Do LHD staff know their Disease Intervention Specialist (DIS)?
- Do LHD staff know their HIV surveillance contact? http://www.michigan.gov/documents/mdhhs/Untitled_520941_7.pdf
- Are submitted case reports from physicians, laboratories, and other providers complete with the appropriate information?

Special Recognition:
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- LHD has demonstrated strong relationships with physicians, laboratories, and other providers in their jurisdiction.
- LHD meets or exceeds completeness of required variables for positive cases by 80% or more, as evaluated by EvalWeb.
- LHD meets or exceeds submission requirements of case report forms (within 7 days of testing) by 80% or more, as evaluated by eHARS.

Indicator 2.2
Confidentiality of written and electronic HIV, AIDS, and STD reports and associated patient medical records are maintained in compliance with the Michigan Public Health Code, the Health Insurance Portability and Accountability Act (HIPAA), and program standards issued by MDHHS.

LHD staff should have on hand:
- Policy around confidentiality of written and electronic HIV, AIDS, and STD reports and associated patient medical records.
- Current training records, orientation checklists, or sign-in sheets showing that staff have been trained in HIPAA and other LHD confidentiality procedures.

MDHHS staff will verify:
- If applicable, LHD test counselor ID number/worker IDs are current, as displayed in EvalWeb.

Special Recognition:
- n/a

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Indicator 2.3
Investigate and respond to situations involving health threats to others, pursuant to the Michigan Public Health Code.

LHD staff should have on hand:
- Policy around confidentiality of written and electronic HIV, AIDS, and STD reports and associated patient medical records.
- Current training records, orientation checklists, or sign-in sheets showing that staff have been trained in investigating and responding to situations involving health threats to others.

MDHHS staff will verify in advance:
- n/a

Special Recognition:
- n/a
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MPR 3
Develop and maintain a system for staff-assisted referral of clients to medical and other prevention services, including mechanisms for monitoring and documenting referrals.

Indicator 3.1
Clients diagnosed with HIV or other STDs receive medical and other prevention services, which are responsive to their needs and in accordance with MDHHS program standards and guidelines.

LHD staff should have on hand:
- Protocol and procedures around staff-assisted referrals.
- Comprehensive community resource referral directory to assist with staff-assisted referrals.
- Current training records, orientation checklists, or sign-in sheets showing that staff have been trained on facilitated referrals.
- Examples of active relationships with community resources, including, but not limited to, MOUs, MOAs, meeting minutes, and contracts.
- Examples of provider and community education plan for HIV and STDs, including, but not limited to, blast faxes, emails, annual report that includes HIV, AIDS, and STD morbidity and mortality information, or other communications.
- Examples of outreach and educational events in the community, including social media posts, list of events held within accreditation timeframe, or other communication.

MDHHS staff will verify in advance:
- Successful linkage of HIV-positive clients to specialty care and partner services via EvalWeb and eHARS.

Special Recognition:
- LHD has unique and/or well-developed relationship with community partners and resources.
- Community resource referral directory is extensive and innovative.
- LHD has protocol and procedures in place to ensure referrals are completed.
- LHD accesses their out of care client information and uses the information to contact clients to link them into care.
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**MPR 4**

Conduct partner services (PS), by referral or through state or local staff, for HIV, syphilis, gonorrhea, and chlamydia.

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**Indicator 4.1**

Individuals diagnosed with HIV, syphilis, gonorrhea, and/or chlamydia receive counseling regarding the availability of partner services (PS) and are offered assistance in notifying their sex and/or needle-sharing partners of their exposure.

**LHD staff should have on hand:**

- Protocol and procedures for conducting PS.
- Current training records, orientation checklists, or sign-in sheets showing that staff have been trained on PS.
- Evidence of communication with health care providers, community based organizations, and other providers regarding PS.
- Documentation of field investigations (using the Patient Field Template for PS or equivalent form).

**MDHHS staff will verify in advance:**

- Are staff entering information into Partner Services Web and/or EvalWeb in a timely and appropriate fashion, if applicable?
- Is information entered into Partner Services Web and/or EvalWeb complete for index clients and partners, if applicable?
- LHD relationship with DIS (via number of referrals)

**Special Recognition:**

Bold formatting signifies a special recognition category that may be converted to an indicator in future cycles.

- LHD has implemented Expedited Partner Therapy (EPT), and it is currently in practice at the LHD.
- LHD recognizes the importance of dealing with acute cases and follows up on these cases in a timely manner.
Indicator 5.1

Monitor and evaluate HIV and STD prevention and treatment services.

LHD staff should have on hand:
- Protocol and procedures for quality assurance in regards to staff competency and performance.
- Evidence of agency-wide and staff inclusive quality assurance activities, such as: quality improvement projects, case conferences, use of trend data to adjust outreach activity.
- Records of staff participating in training and professional development activities.
- County and state data related to HIV and STD prevention and treatment services.

MDHHS staff will verify in advance:
- Timely and complete submission of quality assurance reports (rapid test quality assurance logs and the STD Activity and Medication Inventory Reports).
- Records of LHD attendance at MDHHS trainings, including the annual conference.

Special Recognition:
- LHD has an ongoing quality improvement project that will improve HIV and STD program services.