

TEXAS PROJECT DELIVERY FRAMEWORK
PROJECT CHARTER



Texas Department of State Health Services State HIV Services Standards of Care

VERSION: 0.2

REVISION DATE: May 23, 2014

Approval of the Project Charter indicates an understanding of the purpose and content described in this deliverable. By signing this deliverable, each individual agrees work should be initiated on this project and necessary resources should be committed as described herein.

Executive Sponsor		
Shelly Lucas Manager HIV/STD Prevention and Care Branch TB/HIV/STD Unit Disease Control and Prevention Services	shelley.lucas@dshs.state.tx.us	(512) 533-3106
Signature		Date

Project Sponsor		
Janina Vazquez Manager HIV Care Services Group HIV/STD Prevention and Care Branch	Janina.vazquez@dshs.state.tx.us	(512) 533-3095
Signature		Date:

Project Manager		
Teena Edwards, DrPH, MSN, RN Nurse Consultant HIV Care Services Group	Teena.edwards@dshs.state.tx.us	(512) 533-3076
Signature		Date

Contents

Section 1. Project Overview	1
1.1 Problem Statement	1
1.2 Project Description	1
1.3 Project Goals and Objectives.....	1
1.4 Project Scope.....	2
1.5 Critical Success Factors	2
1.6 Assumptions.....	2
1.7 Constraints	2
Section 2. Project Authority and Milestones	3
2.1 Funding Authority	3
2.2 Project Oversight Authority	3
2.3 Major Project Milestones.....	3
Section 3. Project Organization	6
3.1 Project Structure	6
3.2 Roles and Responsibilities.....	7
3.3 Project Facilities and Resources.....	8
Section 4. Points of Contact.....	9
Section 5. Glossary	10
Section 6. Revision History	11
Section 7. Appendices	12

Section 1. Project Overview

1.1 Problem Statement

Standards of Care are a set of minimum service level activities for programs providing HIV core and supportive services regardless of setting, size, or target population. Although similar, there are slightly different Standards of Care in each of the seven (7) service regions. One set of Standards need to be implemented statewide to ensure services are being provided equally across the state. Therefore, universal core standards will be developed to:

- Clearly define each funded service and describe models service that will be acceptable
- Clarify service expectations and required documentation across HIV/AIDS programs
- Encourage more efficient use of resources
- Promote quality of services

Although these standards set minimum requirements for HIV programs, Administrative Agencies may establish additional requirements.

Having a set standard of care will assist in monitoring each agency through use of a standardized monitoring tool. Currently all seven (7) of the Administrative Agencies use a different approach, tool, and sampling method, and sample size to determine quality of care. By standardizing the monitoring tool, comparison may be made across the state to improve service and clinical outcomes for HIV positive persons regardless of where they reside.

1.2 Project Description

The HIV Services Group will implement a standardized Standard of Care based on information obtained from current local provider and AA monitoring activities as well as needed improvements identified by internal and external stakeholders. Statewide Standards of Care that apply to all HIV health care facilities, regardless of their caseload, location or service delivery model processes for annual review and revisions will be developed. These standards will ensure that the best services and clinical care is provided to patients throughout Texas by improving systems of care delivery and by stimulating quality monitoring. In addition to medical chart review tools, organizational assessment tools will be created or adopted to determine the extent to which these standards have been implemented.

1.3 Project Goals and Objectives

The goal of this project is to ensure a comprehensive and standard approach to service delivery for all HIV positive persons regardless of where they reside. There are two objectives:

- Standard of Care for all Ryan White and State Services funded services will be developed and implemented by December 31, 2014
- Standardized monitoring tools will be developed by December 31, 2014 with implementation January 1, 2015

1.4 Project Scope

Project Includes
Analyses of current provider and Administrative Standards of Care
Development of a matrix to identify common areas
Comparison of current Standards of Care to national and state standards/universal expectations and best practices in other states
Write draft of Texas HIV Program Standards of Care
Presentation of draft standards to external and internal stakeholders for input
Incorporation of feedback and presentation to external and internal stakeholders for final approval
Development of a standard set of monitoring tools to assess implementation of standards at the provider level
Presentation of draft monitoring tools to external and internal stakeholders for input
Incorporation of feedback and presentation to external and internal stakeholders for final approval
Written policy regarding use of Standards of Care and monitoring tools

Project Excludes
Changes to current data management systems.
Changes to current program infrastructure.
Development of Standards or monitoring items for programmatic activities

1.5 Critical Success Factors

- Support from executive and project sponsors and stakeholders throughout the project.
- External and internal stakeholder participation and Subject Matter Experts (SMEs) availability throughout the life of the project.
- Cooperation and active engagement of HIV Administrative Agencies and providers.

1.6 Assumptions

- Sufficient staffing will be available throughout the project; other priorities will be managed to enable the project's success.
- Current HRSA and Public Health Standards regarding HIV care will remain constant for the next two (2) years.

1.7 Constraints

- Limited control and communication challenges dealing with partner organizations (i.e. Administrative Agencies, providers).

Section 2. Project Authority and Milestones

2.1 Funding Authority

No additional funding will be required.

2.2 Project Oversight Authority

The Executive Sponsor will provide executive level oversight for the project. The Project Sponsor will be the responsible party for providing the necessary communication and coordination with DSHS executive management and DSHS program staff.

2.3 Major Project Milestones

Major Milestone/Deliverable	Planned Completion Date mm/dd/yyyy
Once obtained from Administrative Agencies, analyze current Administrative Agency level Standards of Care	06/20/2014
Complete matrix comparing these to national and state standard requirements	06/20/2014
Using Texas HIV Case Management Standards, draft monitoring items for Medical Case Management and Non-medical Case Management	06/30/2014
Draft Standards of Care and monitoring items for Outpatient Ambulatory Medical Care (OAMC)	07/11/2014
Send Medical Case Management and Non-medical Case Management Standards and monitoring items to stakeholders on 7/1/2014 for review and input – 2 week review period	07/11/2014
Hold conference call with internal and external stakeholders to discuss any comments on Medical and non-medical Case Management monitoring items	07/15/2014
Send Outpatient Ambulatory Medical Care (OAMC) Standards and monitoring items to stakeholders on 7/14/2014 for review and input – 2 week review period	07/25/2014
Draft Standards of Care and monitoring items for AIDS Drug Assistance Program and AIDS Pharmaceutical Assistance	07/25/2014
Hold conference call with internal and external stakeholders to discuss any comments on Outpatient Ambulatory Medical Care Standards and monitoring items	07/29/2014
Send AIDS Drug Assistance Program and AIDS Pharmaceutical Assistance Standards and monitoring items to stakeholders on 7/28/2014 for review and input – 2 week review period	08/08/2014
Draft Standards of Care and monitoring standards for Home Health Care, Home and Community-based Health Services, and Legal Services	08/12/2014

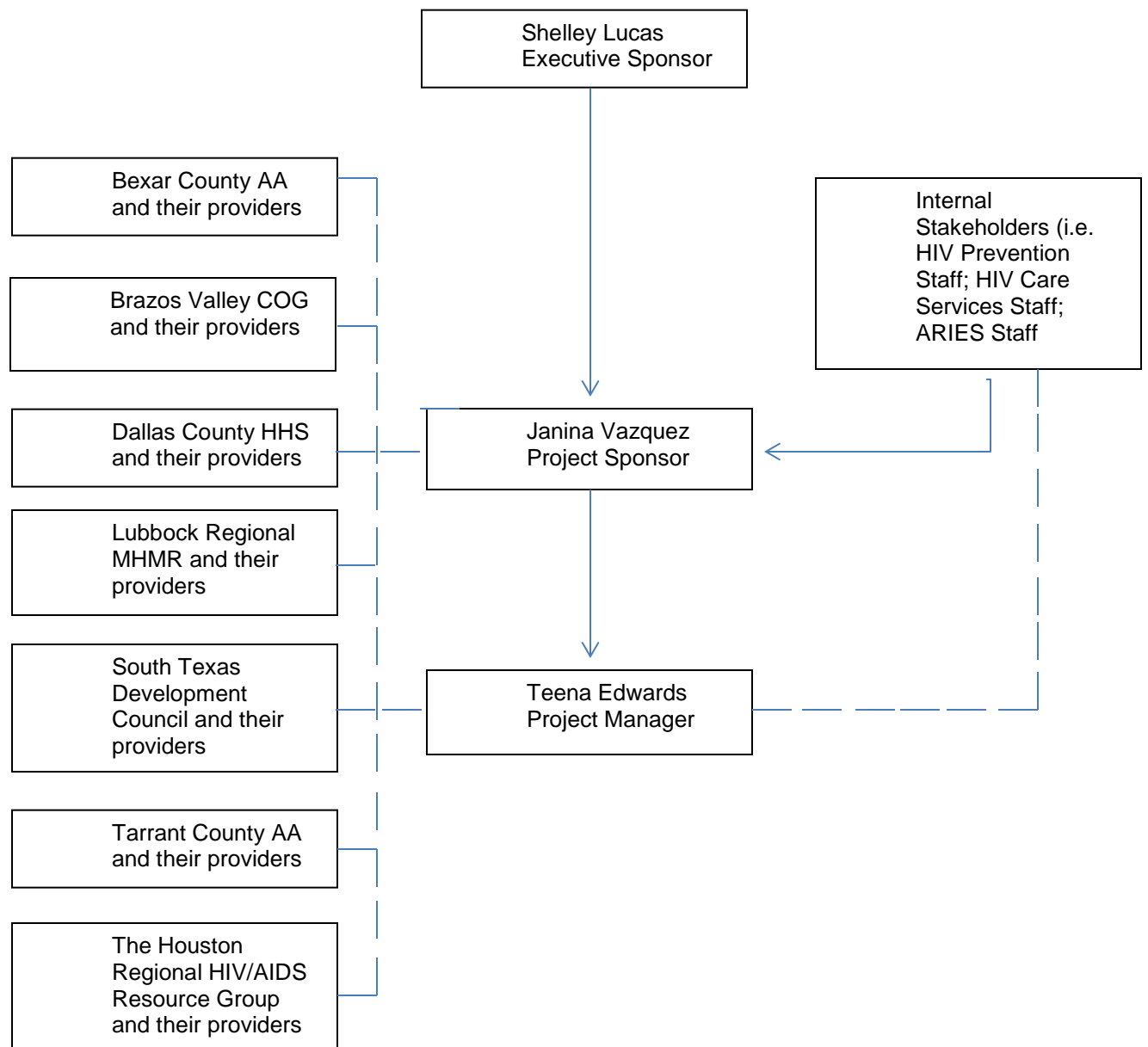
Major Milestone/Deliverable	Planned Completion Date mm/dd/yyyy
Hold conference call with internal and external stakeholders to discuss any comments on AIDS Drug Assistance and AIDS Pharmaceutical Assistance Standards and monitoring items	08/19/2014
Send Home Health Care, Home and Community-based Health Services and Legal Services Standards and monitoring items on 08/15/2014 to stakeholders for review and input – 2 week review period	08/29/2014
Draft monitoring standards for Health Insurance Premium and Cost Sharing Assistance and Hospice Services	08/29/2014
Hold conference call with internal and external stakeholders to discuss any comments on Home Health Care, Home and Community-based Health Services and Legal Services Standards and monitoring items	09/02/2014
Send Health Insurance Premium and Cost Sharing Assistance and Hospice Services Standards and monitoring items on 09/02/2014 to stakeholders for review and input – 2 week review period	09/02/2014
Draft monitoring standards for Mental Health Services and Substance Abuse Services – outpatient and residential	09/12/2014
Hold conference call with internal and external stakeholders to discuss any comments on Health Insurance Premium and Cost Sharing Assistance and Hospice Services Standards and monitoring items	09/16/2014
Send Mental Health Services and Substance Abuse Services – outpatient and residential Standards and monitoring items on 09/16/2014 to stakeholders for review and input – 2 week review period	09/26/2014
Draft monitoring standards for Medical Nutrition Therapy, Psychosocial Support Services, and Medical Transportation	09/26/2014
Hold conference call with internal and external stakeholders to discuss any comments on Mental Health Services and Substance Abuse Services Standards and monitoring items	09/30/2014
Send Medical Nutrition Therapy, Psychosocial Support Services and Medical Transportation Standards and monitoring items on 09/29/2014 to stakeholders for review and input – 2 week review period	10/10/2014
Draft monitoring standards for Food Bank, Emergency Financial Assistance, and Housing Services	10/10/2014
Hold conference call with internal and external stakeholders to discuss any comments on Medical Nutrition Therapy, Psychosocial Support Services and Medical Transportation Standards and monitoring items	10/14/2014
Send Food Bank, Emergency Financial Assistance, and Housing Services Standards and monitoring items on 09/29/2014 to stakeholders for review and input – 2 week review period	10/24/2014
Draft Health Education/Risk Reduction, Linguistics Services, Outreach Services Standards and monitoring items	10/24/2014

Major Milestone/Deliverable	Planned Completion Date mm/dd/yyyy
Hold conference call with internal and external stakeholders to discuss any comments on Food Bank, Emergency Financial Assistance, and Housing Services Standards and monitoring items	10/28/2014
Send Health Education/Risk Reduction, Linguistics Services, Outreach Services Standards and monitoring items on 10/27/2014 to stakeholders for review and input – 2 week review period	11/07/2014
Draft Referral for Health Care/Supportive Services, Respite Care, Treatment Adherence Counseling Standards and monitoring items	11/07/2014
Hold conference call with internal and external stakeholders to discuss any comments on Health Education/Risk Reduction, Linguistics Services, Outreach Services Standards and monitoring items	11/18/2014
Send Health Care/Supportive Services, Respite Care, Treatment Adherence Counseling Standards and monitoring items on 11/10/2014 to stakeholders for review and input – 2 week review period	11/21/2014
Draft Child Care Services, Housing Services, and Rehabilitation Services Standards and monitoring items	11/21/2014
Hold conference call with internal and external stakeholders to discuss any comments on Health Care/Supportive Services, Respite Care, Treatment Adherence Counseling Standards and monitoring items	11/25/2014
Send Child Care Services, Housing Services, and Rehabilitation Services Standards and monitoring items on 11/24/2014 to stakeholders for review and input – 2 week comment period	12/05/2014
Hold conference call with internal and external stakeholders to discuss any comments on Child Care Services, Housing Services, and Rehabilitation Services Standards and monitoring items	12/09/2014
Present and discuss Standards of Care and completed monitoring tools at Town Hall Meetings across the state as needed	12/15/2014 – 12/19/2014
Begin implementation of Standards and monitoring tool for CY2015	01/01/2015

Section 3. Project Organization

3.1 Project Structure

Specify the organizational structure of the project team and stakeholders by providing a graphical depiction as shown in the example project organization chart in the instructions.



3.2 Roles and Responsibilities

Role	Responsibility
Shelley Lucas Executive Sponsor	<p>Ultimate approval authority for project and deliverables and resources.</p> <ul style="list-style-type: none"> Provides strategic direction to the project according to DSHS goals and objectives. Approves scope, schedule, deliverables, and objectives. Oversees project delivery from a business perspective. Signs-off on results during project delivery, including business case analysis, statewide impact analysis, project planning Holds Project Sponsor(s) and PM accountable for completing project as planned.
Janina Vazquez Project Sponsor	<p>Member of DSHS program staff who serves as "champion" for project with stakeholders.</p> <ul style="list-style-type: none"> Provides strategic and operational direction to the project. Assures direction is consistent with DSHS goals and objectives. Identifies stakeholders who should participate in or made aware of project activities. Identifies program staff needed to serve as SMEs. Coordinates communications between the project, program area, and other stakeholders. Reviews progress metrics and reports. Participates as needed through the life of the project.
Teena Edwards Project Manager	<p>Leader responsible for successful delivery of project. Duties include but may not be limited to:</p> <ul style="list-style-type: none"> Responsible to Executive and Project Sponsors for accomplishment of project's objectives. Responsible for completion of project and its deliverables within the defined constraints of time, cost and quality. Serves as the primary point of contact for project communications and status reporting. Reports project progress to Management. Coordinates appropriate participants' involvement in project activities. Ensures resources available for project assignments to facilitate timely completion of project tasks. Identifies potential risks, opportunities, and issues that may have an impact on the project. Develops and maintain project documentation.

3.3 Project Facilities and Resources

Resource Requirement	Responsibility
Work Group Meeting Space	PM and/ or Project Sponsor obtains meeting space
HIV Services Prevention and Services Staff	DSHS HIV Prevention and Services Groups serve as SMEs.
HIV Care Services Group Surveillance Staff	Maintains current application of ARIES for data management
DSHS	Provides IT operations, Telecom, Email and other services

Section 4. Points of Contact

Identify and provide contact information for the primary and secondary contacts for the project.

Role	Name/Title/Organization	Phone	Email
Executive Sponsor	Shelley Lucas	(512) 533-3106	Shelley.lucas@dshs.state.tx.us
Project Sponsor	Janina Vazquez	(512) 533-3095	Janina.vazquez@dshs.state.tx.us
Project Manager	Teena Edwards	(512) 533-3076	Teena.edwards@dshs.state.tx.us

Section 5. Glossary

AA	Administrative Agency
ARIES	AIDS Regional Information and Evaluation System
COG	Council of Governments
DSHS	Department of State Health Services
HAB	HIV/AIDS Bureau
HIV/AIDS	Human Immunodeficiency Virus/Acquired Immunodeficiency Syndrome
HRSA	Health Resource and Services Administration
MHMR	Mental Health Mental Retardation
NQC	National Quality Center
PM	Project Manager
SME(s)	Subject Matter Expert(s)

Section 6. Revision History

Identify document changes.

Version	Date mm/dd/yy	Name	Description
0.1	02/13/14	Teena Edwards	Initial draft
0.2			
0.3			
0.4			
0.5			
0.6			
0.7			
0.8			
1.0			

Section 7. Appendices

Include any relevant appendices.

Not Applicable