**USAPI Integrated Site Visit Review Guide**

**Purpose**

The integrated site visit guide was developed to help the U.S-Affiliated Pacific Islands grantees to prepare for CDC site visits and to guide CDC project Officers during the site visit. The documents and questions apply to HIV, viral hepatitis, STD, and TB programs.

**Instructions for Grantees**

Grantees should review the site visit guide to ensure all documents are available for review during the site visit.

**Instructions for Project Officers**

During the site visit, Project Officers should request that grantees share the documents listed in the Documents table and use the list of questions to facilitate further discussion as needed.

**Section I: List of Support Documents**

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| **DOCUMENTS LIST** | |
| **Document** | **Shared Prior to or during site visit?** |
| ORP Certification Statement or Form; Overall Responsible Party |  |
| Initial Assessment – Appendix B Checklist (pp. 45-54) for Surveillance and Program Data S&C |  |
| S&C Model Policies, requires cross-walk with Appendix B (pp. 45-54) of 2011 S&C Guidelines |  |
| Organizational Chart Program; Bureau; Department |  |
| Office Policies and Procedures Manual, requires cross-walk with Appendix B (pp. 45-54) of 2011 S&C Guidelines |  |

**Section II: Guiding Questions for Project Officers**

During the site visit, Project Officers should use the following questions to guide the discussion with the grantees. For all questions where the response is “No”, please provide additional detail in the Comment box.

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| **GUIDING QUESTIONS** | |
| **Question** | **Yes/ No?** |
| **General** |  |
| Are all staff w/ access to PII trained and signed the confidentiality agreement/pledge? |  |
| Are all staff from TB, VH, STD, and HIV Program w/ access to PII trained and sign the confidentiality agreement/pledge? |  |
| Have IT staff, who provide TA to program for databases, been trained and signed the confidentiality agreement/pledge? |  |
| What are the reporting laws for HIV, viral hepatitis, STD and TB? |  |
| Was the site visit report completed? |  |
| **Physical Environment** |  |
| Were Cross-cutting shredders present? |  |
| Were room/office configurations reviewed?  Note: *Recommend privacy screens on computers as needed.* |  |
| Was the level of security adequate in areas with PII? |  |
| Was the security level of the file room for storing hard-copy reports adequate? |  |
| If keys secure data, are they adequately secured? |  |
| Can people from outside view data through the windows from outside? |  |
| Is the fax machine in a secure location? |  |
| Is there an adequate process in place for handling how hard-copy reports via U.S. mail? |  |
| Who has access to the computer(s) with PII information? (i.e., what types of security measures are in place to limit access?) |  |
| How are hard copy forms, lab lists, etc. handled and stored? |  |
| Is the security level of servers adequate?  Note: *Consider how physically accessible the servers are.* |  |
| Is the security level adequate for rooms where servers are stored? |  |
| Is the security level adequate for personal computers and laptops? |  |
| Can phone conversations on clients’ disease status be overheard by staff not pledged to S&C in the program area? |  |
| Are electronic data, including backups adequately handled and stored? |  |
| **Policies and Procedures** |  |
| Is there a written data security policy and procedures manual? |  |
| Did the grantee describe and adequate process for updating the data security policy and procedures manual? |  |
| Was the data security policy and procedures manual updated in the last year?  Note: *If not, please provide date in the Additional Comments box.* |  |
| Is there a data release policy? |  |
| Are staff aware of the data release policy? |  |
| Do staff have direct access to the policy manual? |  |
| Are there restrictions on access to and release of surveillance and program data locally? |  |
| Is there a retention policy for hard copy forms? |  |
| Are methods used to transmit and share electronic data secure?  Note: *If not, please provide details on how the grantee is transmitting and sharing electronic date in the Additional Comments box.* |  |
| Are there restrictions on access to and release of surveillance and program data locally? |  |
| Is the faxing policy adequate? |  |
| Are there program policies or standard operating procedures regarding access to or use of the registry, non-registry, or prevention data by other than authorized personnel in your program? |  |
| Would the Possible Next Steps Action Items below be relevant for you to tell your grantees for your program to help with program integration for validation? |  |

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| **Additional Comments:** |

**Possible Next Steps**

Based on needs identified during the site visit, the following action items may be conducted by the grantees and updates provided to the CDC Project Officer.

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| --- | --- | --- | --- | --- |
| **Action Item** | **Recommended?** | **Completed?** | **Completion Date?** | **Comments** |
| Seek appropriate [health department] approvals from all programs to make policy changes in each program area assessed |  |  |  |  |
| Form a workgroup representing all program areas to address S&C recommendations from the report |  |  |  |  |
| When possible, form multiple task-specific committees for division of labor to proactively pursue changes and upgrades |  |  |  |  |
| Routinely report on the workgroup’s progress to all of your CDC Program Consultants/Project Officers and [other appropriate CDC staff]; seek technical assistance with the process when needed |  |  |  |  |