

## HIV Health Services Planning Council Sacramento TGA

### Policy and Procedure Manual

**Subject:** Outreach Services Standard

**No.:** SSC 19

**Date Approved:** 12/08/10

**Last Revised:** 12/08/10

**Date Reviewed:** 12/08/10

**Policy:** The attached document represents the service standards to be utilized when providing outreach to people in the Sacramento TGA with unknown HIV disease or those who know their status so that they may become aware of, and may be enrolled in care and treatment services. This standard is to be used in conjunction with other service standards for medical, psychosocial and support services as developed and approved by the HIV Health Services Planning Council.

As directed by the HIV Health Services Planning Council priorities, when funded, the following service standards will apply to Ryan White contracted service providers.

1. Ryan White funding is to be used for HIV/AIDS to identify people with unknown HIV disease or those who know their status so that they may become aware of, and may be enrolled in care and treatment services. As such, any outreach services which are paid for through Ryan White funding shall be related to assisting clients in accessing HIV healthcare or other social support service appointments related to maintaining healthcare (i.e. ADAP, Medi-Cal, etc).
2. Ryan White funding is to be expended in a cost effective, equitable manner. Outreach services paid for with Ryan White funds shall be provided in accordance with the allocation priorities and directives adopted by the Sacramento TGA HIV Health Services Planning Council (“HIV Planning Council”), or through an alternative assessment process administered by a RW Agency.

### 3. PURPOSE OF OUTREACH SERVICES

The Health Resources Services Administration (HRSA) defines outreach services as programs that have as their principal purpose identification of people with unknown HIV disease or those who know their status so that they may become aware of, and may be enrolled in care and treatment services (i.e., case finding), not HIV counseling and testing nor HIV prevention education. These services may target high-risk communities or individuals. Every effort must be made for Outreach programs to be delivered in coordination with local HIV prevention outreach programs to avoid duplication of effort; be targeted to populations known through local epidemiologic data to be at disproportionate risk for HIV infection; be conducted at times and in places where there

is high probability that individuals with HIV infection will be reached; and be designed with quantified program reporting that will accommodate local effectiveness evaluation.

Key activities include:

- Outreach to partners of positive people
- Distribution of safe sex kits to high risk communities
- Attendance at community awareness events to encourage testing
- Follow-up on referrals from Ryan White agencies of persons who have fallen out-of-care.

#### GOALS OF OUTREACH SERVICES:

The goal of outreach services is to promote access to and engagement in appropriate services for people living with HIV who:

- are aware or unaware of their HIV status, but are not currently in care (unmet need);
- have fallen out of care or are at-risk of falling out of care;
- are self-managed or those who don't utilize the continuum of care;
- promote communication and collaboration between the clients and all persons involved in the client's care;
- Educate the client on available resources and assist them in accessing those resources.

#### OUTREACH SERVICES EDUCATION REQUIREMENTS & TRAINING

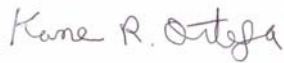
All agencies shall comply with Health Resources Services Administration (HRSA) standards as well as all federal, state, and local requirements for certification and/or license.

At minimum, all outreach staff will possess the ability to provide linguistically and culturally appropriate services for people living with HIV, and complete documentation as required by their positions. Staff will be sensitive to the needs of persons of diverse life experiences, including substance users, persons with mental illness, transgendered individuals and persons with co-occurring disorders and, ideally, will have prior experience working with the target population. It is imperative that outreach workers are well acquainted with the entire HIV service delivery system, especially primary medical care and case management services. Programs are urged to utilize outreach workers who demonstrate personal life experience in managing HIV and/or negotiating the local service delivery system.

4. Outreach staff at RW Agencies may, at any time, submit to the RW Fiscal Agent requests for interpretation of these or any other Services Standards adopted by the HIV Health Services Planning Council, based on the unique medical needs of a client or on unique barriers to

accessing medical care which may be experienced by a client.

5. Clients shall have the right to request a review of any service denials under this or any other Services Standards adopted by the HIV Health Services Planning Council. The most recent review / grievance policies and procedures for the RW Agency shall be made available to each client upon intake. A copy of the grievance policy, signed by the client, shall be maintained in the client's file. Such policies and procedures shall include an explanation of the criteria and process for accessing the Planning Council's Client Advocacy Program.



Adopted:

Kane Ortega, Chair

Date 12/08/10