

**Virginia Department of Health  
 Division of Disease Prevention  
 HIV Care Services  
 Service Standards**

**Outreach  
 2009-2010**

**Definition of Service:** Outreach services are 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, individuals, or persons lost to care. Outreach programs must be planned and 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 a high probability that individuals with HIV infection will be reached; and be designed with quantified program reporting that will accommodate local effectiveness evaluation. (HRSA definition)

**Objectives for Service:**

- To identify those individuals who have high risk behaviors and are unaware of their HIV status or those who are HIV+ and not engaged in care.
- To facilitate access to primary medical care and support systems for those individuals living with HIV/AIDS
- To quantify the number of clients remaining in care over 6 months

STANDARD	MEASURE
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<b>Program Expectations:</b>	
The agency has defined goals to identify and bring into care known HIV positive persons that have not had medical care for six months or persons lost to care or pre-diagnosed persons.	Documentation of the target population and goals of the outreach efforts is available for review.
The agency demonstrates its ability to identify and plan programs to reach the targeted and underserved populations.	Documentation of the outreach efforts used to reach the targeted population is available for review.

<p>The agency uses a variety of educational materials in its outreach activities, such as the following:</p> <ol style="list-style-type: none"> <li>1) Public service announcements</li> <li>2) Poster/flyers</li> <li>3) Educational brochures/pamphlets</li> <li>4) Agency brochures describing services</li> <li>5) Other</li> </ol>	<p>Educational material used in outreach activities is available for review.</p>
<p>The agency uses outreach materials tailored to the target population such as the following:</p> <ol style="list-style-type: none"> <li>1) Language</li> <li>2) Cultural</li> <li>3) Literacy level</li> <li>4) Risk factors</li> </ol>	<p>Educational material is tailored for the target population and is available for review.</p>
<p>The outreach efforts are appropriate in both location and time for reaching the target populations.</p>	<p>Documentation of the location and times of outreach activities is available for review.</p>
<p>The outreach worker maintains documentation of outreach activities on a standardized agency form which includes:</p> <ol style="list-style-type: none"> <li>1) People contacted <ol style="list-style-type: none"> <li>a) gender</li> <li>b) race/ethnicity</li> <li>c) location</li> </ol> </li> <li>2) Group/community presentation</li> <li>3) Materials distributed</li> <li>4) Referrals to counseling/testing</li> <li>5) Referrals to primary care</li> <li>6) Referrals to other community services</li> </ol>	<p>Documentation of the outreach activities is reflected in a standardized agency form, signed and dated and available for review.</p>
<p><b>Service Standards:</b></p>	
<p>The outreach worker refers the client to an agency to be screened for eligibility for Ryan White Part B services.</p>	<p>Documentation of the referral is present in the client's record, signed and dated.</p>
<p>The client is assessed for current participation in medical care.</p>	<p>Documentation of the assessment will be present in the client's record, signed and dated.</p>
<p>The client is referred to an appropriate case manager for successful linkage to services.</p>	<p>Documentation of the client's referral to case manager will be present in the client's record, signed and dated.</p>
<p>The outreach worker follows up with case manager <b>within 30 days</b> for outcome of referral.</p>	<p>Documentation of this contact <b>within 30 days</b> and whether client has engaged in medical care will be present in the client's record, signed and dated.</p>
<p>The client is monitored at <b>6 months post entering into medical care</b> to determine that at least 1 additional appointment has been kept.</p>	<p>Documentation of monitoring, outcome and appointment date will be present in the client's record, signed, dated.</p>
<p>Educational material is provided for the client as needed.</p>	<p>Documentation of the educational material provided to the client will be present in the client's record, signed and dated.</p>

All contact (face to face, phone, etc) with the client and outreach worker is documented.	Documentation of all contact will be present in the client's record, signed and dated.
<b>Qualification:</b>	
All outreach staff will have a High School Diploma or GED and one year of experience working with clients infected with HIV or additional health care training.	Documentation of the qualifications will be in the outreach staff's personnel files and available for review by the peer review team.
<b>New Hires:</b>	
Completion of the following topics occurs <b>within 180 days</b> of hire: <ol style="list-style-type: none"> <li>1. HIV 101</li> <li>2. Outreach and Procedures</li> <li>3. Infection Control</li> <li>4. Confidentiality</li> <li>5. Cultural Competency</li> <li>6. How to Make a Referral</li> <li>7. Adherence</li> </ol>	Documentation of the completion of these topics will be in the outreach staff's personnel files and available for review by the peer review team.
<b>Annual training:</b>	
Outreach staff attends 6 hours of continuing education on HIV/AIDS and 1 hour on cultural diversity annually.	Documentation of the completion of the continuing education will be in the outreach staff's personnel files and available for review by the peer review team.