

## Comments on Outreach Services

### Standards

#	Location	Comment	DSHS Response	Discussion	Determination
1	Individuals who are not aware of their HIV status should be linked to Early Intervention Services (EIS) or a collaborative prevention program.	The local area has not had any organization providing EIS, to my knowledge. Because of this, Outreach has worked with these clients instead, and ensure they are linked to PMC and CM/SS as defined by completion of intake appt.	This is fine since your program is a collaborative prevention program		
2	Agency Policies Collection of client satisfaction and methods to address	Something is missing here.	Meant to imply methods to address collection of client satisfaction. Will change wording.		
3	Staff Education Within the first (3) months of hire, training for new staff and volunteers	A set # of CEU may be helpful – this is vague.	Will specify 16 hours for the initial training.		

	shall include but not limited to: -Specific HIV-related issues				
4	Ongoing training for staff must be provided to appropriate staff to maintain current knowledge	How many hours annually?	Will specify 12 hours for ongoing training annually		
	Client documentation will include:  -Linkage to services  If HIV+ attendance at first medical care appointment	HRSA defined and contractual outcome is Linkage to medical care – as defined as successful intake. Is this changing to be defined as attendance of medical appt? Will need clarification for the grant, and for what we report on.  Outreach does note first medical appt on client spreadsheet so this is achievable, FYI	Yes, this is changing to verifying attendance at first medical appointment.		