## **COMMUNITY OUTREACH**

- a. The Contractor shall provide community outreach services to individuals of African American and Latino descent who have substance use disorders and reside in the greater New Haven area. Such services are defined as activities designed to assure the maximum utilization of the program's treatment services and access to these services for the target population.
- b. Specifically, the Contractor's community outreach program shall meet the following requirements:
  - 1. All services shall be provided in both English and Spanish;
  - 2. All individuals served shall be provided substantial Human Immunodeficiency Virus (HIV) infection prevention and management interventions;
  - 3. Acupuncture, herbal and yoga or tai chi therapies shall be offered as adjunct treatment;
  - 4. The Contractor shall provide community-based organizations with information on substance use disorder treatment in general and specific information on how individuals may access the Contractor's services;
  - 5. The Contractor shall facilitate the entrance into treatment by conducting intake assessments and assisting individuals to meet all admission requirements;
  - 6. The Contractor shall send representatives to community forums in order to facilitate collaboration with other providers and coordination of services to individuals being served;
  - 7. The Contractor shall establish linkages with other organizations which provide services to the target population in order to facilitate referrals to such services; and
  - 8. The Contractor shall attempt to provide all services at the main program location.
- c. The services shall be provided from the following locations with the capacity and, hours of operation as described below:

Location	Capacity	Hour of Operation

- d. The Contractor shall provide services which meet the required utilization rate for those services. The minimum acceptable utilization rate for community outreach programs is 90% of the total program capacity for individuals served annually as described in section C. above. The Contractor shall ensure that the service meets the required utilization rate. Such information shall be verified by the Department in the time, form and manner that the Department chooses.
- e. The Contractor shall implement the programs and services described herein to result in the following outcomes on behalf of individuals served. Such outcomes shall be measured in the manner described herein. Outcome results achieved pursuant to these terms and conditions will be monitored by the Department through data reported by the Contractor to the Department's information systems, in observations through site visits and/or in any other required monthly service reports. The Department's outcome indicators for the Contractor's funded services are as follows:

## PERFORMANCE OUTCOME MEASURES

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## COMMUNITY OUTREACH

OUTCOMES	MEASURES	
1. Contractor will meet reporting requirements in a timely manner.	Department required data will be submitted to the Department's data collection system no later than the 15 <sup>th</sup> day of each month.	
2. Contractor will meet the expected utilization rate or annual projection of individuals to be served for this level of care.	A utilization rate of at least 90% will be achieved.	
3. Latinos and African - Americans have open access to substance use disorder treatment.	At least 30% of all referrals to Multicultural Ambulatory Addiction Services (MAAS) substance use disorder treatment are African – Americans from the greater New Haven area.  At least 30% of individuals admitted into MAAS' treatment modalities are African – Americans from the greater New Haven area.  At least 20% of all referrals to MAAS' substance use disorder treatment are Latinos from the greater New Haven area.  At least 20% of all individuals admitted into MAAS' treatment modalities are Latinos from the greater New Haven area.	
4. Individuals' psychosocial and health needs are addressed.	At least 70% of the population in MAAS substance use disorder treatment modalities receive referrals for services at other appropriate providers.	
5. Individuals address personal HIV/ Acquired Immunodeficiency Syndrome (AIDS) issues including risk reduction and disease management.	At least 90% of all individuals discharged from MAAS' treatment modalities received HIV / AIDS referrals and / or direct services.	