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Part B Networking Meeting

May 25th, 2022

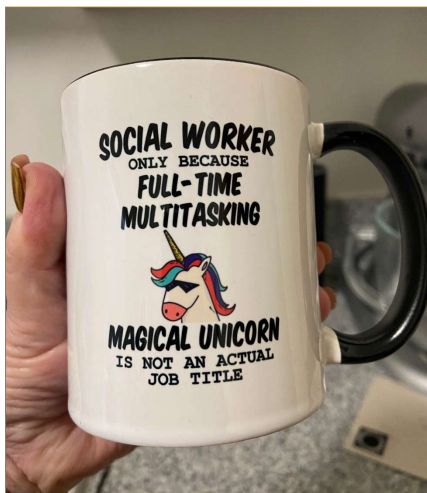
Yasmin Andre, Director

Doris Huff, Planning & Evaluation

Whitney Marshall, Planning Council Support Manager

Mikaela Mendoza-Cardenal, Clinical Quality Manager

Welcome!



Please respond to the Materials e-mail with your additional spoken languages to add to the contact directory 😊

Medical Case Management Training



Online

- Modules close on 06-03-2022



<https://aspiretraining.learnupon.com/dashboard>

In-Person

Comprehensive Health Care

1495 N. Harbor Blvd.

Melbourne, FL 32935

- **Date:** Tuesday, June 7th and Wednesday, June 8th
- **Time:** 9:00 AM to 5:00 PM

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Central Florida HIV Planning Council

Survey & Upcoming Events

Mika Mendoza

HIV Care Needs Survey



Survey available online and via paper copy* in English, Spanish and Creole.

- **Closes June 1, 2022**
- Open to any person with HIV
- Client drawing for raffle prize!
- Provider recognition for exceeding target

* Paper copies of the survey may be requested from and returned to Planning Council Support (whitney.marshall@hfuw.org)

Provider	Completed Surveys	Target
Burnham, Woods, Champa & Associates	1	5
Unconditional Love, Inc. dba Comprehensive Health Care	96	68
FDOH Brevard	5	5
FDOH Osceola	10	60
Hope & Help Center	74	115
Miracle of Love, Inc.	8	189
Project Response, Inc.	20	49

Picnic with a Purpose



Carl T. Langford Park
 1808 E Central Blvd.
 Orlando, FL 32802

- 😊 Food
- 😊 Games
- 😊 Music
- 😊 Prizes
- 😊 Member Appreciation
- 😊 Family Day

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Ryan White Updates

RW Eligibility Portal

Mika Mendoza

FL RW Portal

Path to Centralized Eligibility



- Eligibility ONLY is moving to the RW Portal
- All other tasks and services will still be provided through CAREWare & Provide **for now**
- Clients can upload forms & attachments through the portal **(optional)**

**Tentative
 launch date is
June 6th, 2022**

FL RW Portal

Training Sessions



[Click Here to View RW Portal Training Recording](#)

- Training sessions were held last week by FDOH
- Sessions were recorded and are available for viewing
- Testing platform is accessible

Today: Creating a client & assessing eligibility

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FL RW Portal

Clarifications



- All CAREWare clients will be imported to RW Portal
- New clients will be created in RW Portal, then transferred to CAREWare via the Portal
- RW Portal will upload attachments on a nightly basis

For now:

- Services will still be submitted in CAREWare
- Case notes must be documented in both the Portal and CAREWare

Waiting to hear if annual review assessments must still be completed in CAREWare

✗ No more Eligibility Staff Assessment Worksheet

✗ No more PCCER
(replaced by RW Portal Recertification Form)

✗ No more NOE in Custom Forms

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FL RW Portal

Self-Attestation Update



Clients may complete a six-month self-attestation* if there are **NO CHANGES** to

1. Income
2. Insurance
3. Address
4. Household size

*Recertification Form

NO CHANGES means:

- Approximate same amount of hours worked at the same rate of pay
- No increase in SSI/SSDI award amount
- No changes to insurance status or provider
- Housing status has not changed **AND** residence remains the same
- No births, marriages, divorces, or deaths in the household

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FL RW Portal

Completing Eligibility



[Click Here to Access the Testing Platform](#)

Keep in mind:

- Service county must match eligibility staff's county
- Assessment must be completed the **SAME DAY** it was started
 - Do not begin assessment without receiving all documents!

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FL RW Portal

Open House



Virtual Open House

Wednesday, May 25

Thursday, May 26

Friday, May 27

**3:00 PM to 4:00 PM via
Microsoft Teams**

[Click Here to Join the
Open House Meeting](#)

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CASE MANAGEMENT TOWN HALL REVIEW

Whitney Marshall

Event Summary



- May 6, 2022 – approximately three hours long
- Attended by over 43 case managers and supervisors
- Responses were submitted in-person, online via WebEx, and via Mentimeter poll
- Case manager-only breakout session was extended to one hour



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Questions Asked



1. What are the barriers to reaching/contacting clients?

2. What resources and training, such as communication tools or technology, do you feel that you need in order to contact and provide quality care to clients?

3. What solutions would you have to prevent compassion fatigue, burnout, or secondary trauma?

4. What solutions would you have to some of the issues from the March 15th Town Hall (see handout), or what solutions do you have to issues within the Ryan White system in general?

5. What services are you having difficulty linking clients to?

6. If funding was no object, how would you design the Case Management system?

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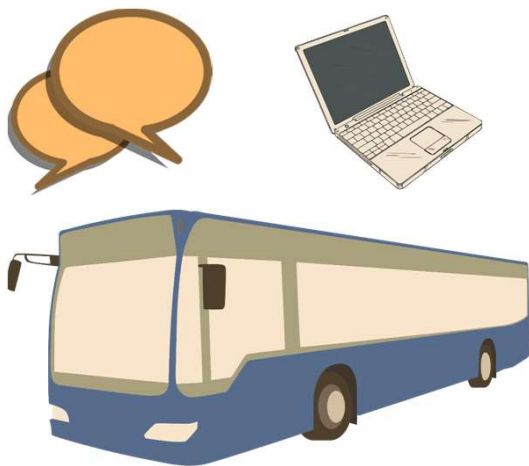
Commonly Identified Barriers



- High caseloads
- Case managers overwhelmed with requests (non-medical)
- Difficulty reaching homeless or recently incarcerated clients
- Limited HOPWA services
- Disparity in available services across multiple counties
- Competing priorities/needs for clients
- Inconsistent or unreliable phone communication with clients
- Scheduling challenges for clients who are doing well and/or working

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Commonly Identified Resources & Training Needs



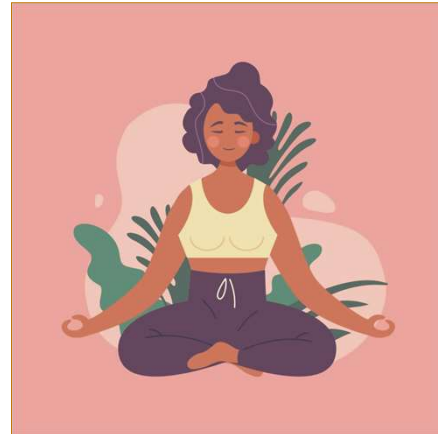
- Secure email and text options for clients
- Additional options for transportation (rideshare or train)
- Messaging system via a patient portal
- Training resources for clients
- Cultural humility training for staff and clients

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Commonly Identified Solutions to Preventing Compassion Fatigue, Burnout, or Secondary Trauma



- Taking PTO (and not working while out)
- Mental health days
- Case conferencing with care team
- PTO roll over
- Respite/bereavement to support mental health of case managers
- Relying on coworkers to communicate or alleviate stress
- Companionship program for clients without support system
- Home health aides
- Services for clients aging with HIV



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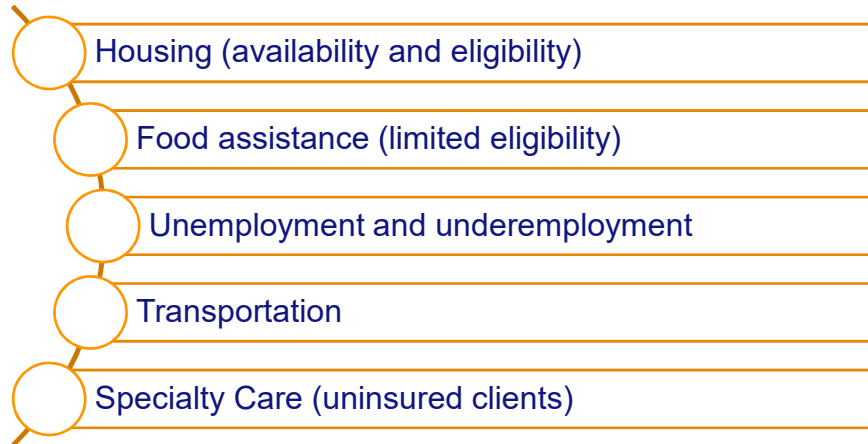
Solutions to Ryan White System of Care Issues



- Updated resource inventory
- Customer service and anti-stigma training for medical providers
- Including demographic-specific resources (i.e. Knowing which providers serve the Haitian community)
- Patient assistance committee to provide assistance to clients with services such as transportation
- Not limiting bus passes based on client adherence
- Educational resources in schools for prevention

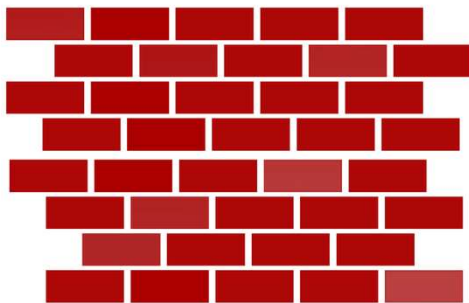
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Service Linkage Challenges



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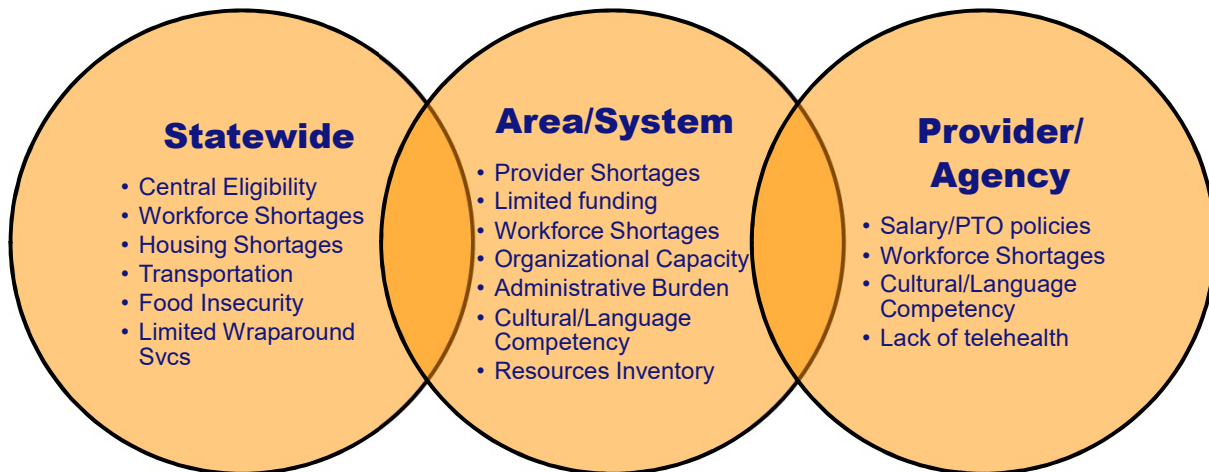
Staff Barriers to Providing Care



- ✗ Changing contact frequency from ICM to RS
- ✗ Time management
- ✗ Documentation frequency and redundancy
- ✗ Face-to-face appointment requirements too high (2 per month ICM)
- ✗ No centralized eligibility or system
- ✗ No telehealth capacity

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How These Barriers Overlap



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If funding was no object, how would you redesign the Case Management system?



- 🗨 One-stop shop for services available in each county (HOPWA, ADAP, RW, AOMC, Mental Health, Dental)
- 🗨 Drop-in centers for PWH
- 🗨 Gift cards for clients to incentivize appointment retention
- 🗨 Incentives for case managers to practice self-care; Employee Appreciation
- 🗨 Transportation for all clients
- 🗨 Both ICM and RS able to conduct eligibilities (Part A)
- 🗨 Additional wraparound services
- 🗨 Category between RS and ICM
- 🗨 Reduce caseloads (by hiring more case managers)
- 🗨 Cell phones provided to clients who are homeless and cannot get the free cell phone program
- 🗨 Ability to do RW and ADAP eligibility at the same time
- 🗨 Creating an award system for clients
- 🗨 Ryan White Uber program for transportation

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Case Management Break-Out Session



- 🗨️ Override process is available, but overrides are frequently denied
- 🗨️ Language line is not sufficient for serving non-English speaking clients
- 🗨️ Intermediate case manager position
- 🗨️ Shortage in case managers and RS
- 🗨️ Reduce qualifications for EIS
- 🗨️ Reduce caseloads
- 🗨️ Raises for staff transitioning from MCM to ICM
- 🗨️ Compensation commensurate with workload (40+ hour work weeks)
- 🗨️ Flexible (flex time) and hybrid schedules
- 🗨️ Unit system limits the capacity of staff to meet the needs of clients (Part A)
- 🗨️ After-hours support
- 🗨️ Case note burnout (72 hours)
- 🗨️ Better support from case management supervisors
- 🗨️ Caseload caps for RS(100) and MCM(35)
- 🗨️ Rename RS to Non-Medical Case Management
- 🗨️ Disparity between Ryan White directives and trainings
- 🗨️ Client-centered education centers

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PART B BREAK-OUT SESSION

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Evaluation

Mika Mendoza

Evaluation

Mentimeter



Please go to [menti.com](https://www.menti.com)

Code: 1555 3876

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Provider Announcements & Updates

Meeting Attendees