

WEBINAR VIDEO TRANSCRIPT

DHHS / Health Resources and Services Administration (HRSA)

The Road to Dissemination (Session 3): Documenting the Journey from Planned Approach to Intervention Implementation

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SHELLY KOWALCZYK: Hi, everyone. My name is Shelly Kowalczyk. I'm with the MayaTech Corporation, and I serve as the project director for Integrating HIV Innovative Practices. And thank you so much for joining us for session three of this webinar series on The Road to Dissemination.

So just quickly, I wanted to talk about Integrating HIV Innovative Practices or IHIP. This project supports the coordination, dissemination, and replication of innovative HIV care strategies in the Ryan White HIV/AIDS program. And we do this through the development and dissemination of implementation tools and resources such as implementation guides, fact sheets, frequently asked questions, and we also have some video spotlights for some of the featured interventions. Those resources can be found at targethiv.org/ihip.

We also provide technical assistance. We have capacity building TA webinars that feature our interventionists. We have one coming up next Tuesday, May 2. I think it's at 2:00 or 2:30, I can't recall, but that will be featuring a couple of interventions on transgender women and I think a Latino intervention. We also provide-- we can help coordinate peer-to-peer TA on the featured intervention. So if you have interest in connecting with the interventionist and some support in sort of coordinating and planning for implementation, we can help you with that.

Also, today's webinar is part of the support that we provide in helping others develop and disseminate their own tools and resources. So we have some webinars. And also, for anyone who wants some additional or individualized support for developing or disseminating tools and resources, you can also request some technical assistance from us. And any TA request can be submitted to our help desk-- ihiphelpdesk@mayatech.com.

So today, I'm happy to introduce our presenters from ACOJA Consulting. We've got Jackie Cruzado on the line. She is a public health professional with over 30 years of direct service, supervisory, and management experience in correctional public health, health education disease prevention, curricula development, program management, and team building across systems. Jackie successfully managed several large-scale federally-funded programs implementing, evaluating, and adapting interventions that impact primary care, housing, employment, mental health, and substance use treatment services.

Ali Jordan is a licensed social worker and a national public health leader with over 25 years of senior government and system management experience from procurement and grants to re-entry and continuity of program implementation and evaluation. This work extended to NYC jail visitors where she helped create, implement, and evaluate a successful overdose prevention program distributing nasal naloxone. And with that, I'm going to turn things over to Ali.

ALI JORDAN: Hi, there. So good to see so many folks. And the participants, we hope to also see your comments in chat. So we're asking you all, now we've introduced ourselves, to introduce yourselves. And so many of you, we know have been here before. There's others that this may be your first session. No worries. We'll keep everybody apprised as to next steps. And we'll be around, as Shelly said, at the end to answer any additional questions about your specific projects and your specific project needs.

I'm really interested to know, what interested you all in this session? We're hoping that it's useful on a number of levels. And whether you've ever had been in projects before or not, is the next question. Oral health is always something that is of serious interest to folks and mostly, what we're looking for folks to understand is about building programs and approaches. So regardless of what aspect of Ryan White programs or even non-Ryan White programs you'll be touching, we will be addressing those.

And today, what we really want to talk about here is the purpose of implementation manuals. And we will be referencing lots of collaborations that we did have with our project officer, Jessica Xavier, who's joining out of curiosity just to see all the lessons that we may or may not have shared at the time that we learned together.

So this is the third session. We're talking today about how certainty is the-- the only certainty is change. We've talked about really getting folks on board. We've been using analogies to traveling. So if you haven't yet been on a spins or other kinds of long-term project, the reality is that you may have planned a trip with a bunch of folks or been on a journey with people. And so if you think about that as an analogy for working on these projects that might be helpful. And we do have one more session in a month from now so we'll hopefully, see you in May, as well.

So just know that no matter how good your plan is, life happens, change happens. And so when folks say, oh, my proposal-- I did everything we said in the proposal and that's my implementation plan, we know that it's not actually what happens because life happens. Change happens. So the question isn't whether or not change happens. The question is, how do you respond to that change, and how do you adapt your approach? And can you, in fact, predict some things that might change or even plan in such a way that when real life comes into being that you can have a way to adapt?

And so our session today is about documenting that process. You can see the other sessions, and we're halfway through, literally. So session one, we went over the background's first three sections in the implementation manual, which you can see on the HRSA website. It gives you a nice framework for any, actually, implementation manual that you might want to do in terms of

key takeaways. You can see in the second session, we're still talking about mapping your route to the destination and the types of activities we reviewed at that session.

Obviously, you want to keep the reader's interest. No matter what, if you don't have a good opening, they're not going to keep turning the page. And so today, we're going to have these three sections of our session today-- documenting change and looking about how to do that as well as then, a small group activity and then reviewing the back end sections of the manual and outputs and outcomes and lessons learned.

So if today is your first session, please introduce yourself and any projects you had in terms of what your role is. Some of you have been doing that away. And if it's not your first session and you're coming back, we'd love to know what key takeaways you might share with the others who are clicking around in the chat. And any updates if you were able to use any of the tools or tips or resources that we posted. Jackie, anything else for the audience?

JACKIE CRUZADO: Document everything, all the changes.

ALI JORDAN: Documenting, right? [AUDIO OUT] And so, all of this is working within a theme. You certainly have-- your project officers are there to make sure that as you run into things that don't necessarily look the way you expected, that you keep them apprised. That you use them as partners. And to make sure that when you're implementing projects, it's really similar to going a group travel. So you want to develop an itinerary. you have a plan.

And then you get to a place and the restaurant's closed or the hotel is overbooked or the flight times change. And so all of these things be helpful if you have a really good travel leader who gives you ideas for backup plans even before you start. Some of the good ones you'll see-- alternate route or if this experience doesn't work for you, try something else.

And then, you really want to have a champion. You want to champion it all the way through. And frankly, Jessica has been that for us for so many times.

And just know that having a project officer that understands and is facilitating and supporting so many of our project officers who are really championing the projects all the way through-- and they're not put off by things changing. Actually, they're glad that you called. And then you can figure out ways of staying within-- still coloring within the lines but maybe changing the color of the crayon you're using because you have differences.

And so similarly, your guiding experience is you want to make it memorable. You want to make sure that it's realistic and that you really overplan, right? So having contingencies in your back pocket. Jackie, do you ever have a backup on your backup plan?

JACQUELINE CRUZADO: Yeah, I got. I usually have three or four backups.

ALI JORDAN: Yeah.

JACQUELINE CRUZADO: It's important to have backup.

ALI JORDAN: And how do you even conceive of what a backup plan might look like? How do you do that? I've seen you, but I'm not sure how you do it.

JACQUELINE CRUZADO: Well, I think what happens is that you know that change is always around. Like, there's always something changing. And you got to think ahead, if this changes, what would you do next or how would you take care of that change. And then the most important thing is just talking to your project officer when you have changes because they help you-- they guide you and they help you put it differently or maybe suggest something else that you might never thought about.

ALI JORDAN: Right, and then there's always key aspects that you're not going to want to have different, but you want to make sure that you're staying within the spirit of the scope of work. The other thing I think is just making sure that the journey is memorable regardless of whether it followed the plan or not and so making sure that your team is working well together, that you have five-- say, five positives, five warm fuzzies for each cold prickly, and maybe you won't have cold pricklies. But if it's raining and your luggage didn't arrive, these things happen. But the question is, what do you do about it? Is the experience after the fact one that people remember fondly, or are they going to remember the distraction?

We talked about this earlier detractor becoming our biggest supporter. Do you remember what happened, Jackie? Do you remember? With Mary, right?

JACQUELINE CRUZADO: Oh, yeah, Leon Mary. You're always going to have someone in the room who is always going to challenge you regardless of what you're trying to do. But at the end, that particular person became the champion for us, yeah.

ALI JORDAN: So she said, "Well, what are you doing new that's different than what we've been doing?" And so we could have spoken all day long, but it was the actions that spoke louder than words. And then during one presentation, we were finished with the slides, and she said, "No, no, but tell them what you did." And I was like, what did we do? And so she wound up actually presenting some of the more meaningful outcomes in ways that we would have never been able to do for ourselves. So just know that that can really make a difference.

So we talk about always say yes, always make your project look good. This comes from improvisational theater. If you ever have had an improv class, give me a thumbs up or a hey out and know that yes-- and Whose Line Is It Anyway uses this regularly. These rules are from Tina Fey.

But the idea is that you want to be open. It's not necessarily that you agree all the time with folks. But you want to make sure that they know that what they're saying is heard and that if you have alternatives to it or you want to come around to it, that you don't end the conversation with a no because no is a conversation ender.

So what you want to do is say yes and then consider what your partner's talking about and know that there really are no mistakes. So what you want to do is take those things as

opportunities to make a difference. And if you tried something and it didn't work, then acknowledge that and say "and," yes, and, right, what are we going to do about it?

So this all is designed by working together in collaboration across systems. So folks don't necessarily know one another. They may or may not work together regularly. But we know that with these projects comes collaborators. And without them, it's really hard to sustain on the interventions.

And so there are approaches in planning and development that we just wanted to remind you of in terms of plan, do, check, and adjust-- is a good one for this type of approach. Logic models we've spoke a lot about at our last session. But it's a similar methodology, where you have inputs and activities, outputs and outcomes. But then you want to come back and loop to what were the external factors. There's lots of templates for you guys.

Think about benchmarking in terms of what are we doing now, what are others doing, how can we put that together into something that was some kind of creative adaptation. Take the-- go to IHIP. There's so many evidence-informed interventions, the dissemination of evidence-informed projects. It has four different projects that you can design and adapt for your own use. There's lots more out there.

Take that creative adaptation and think about how can we apply it to a different scenario where we're talking here with someone from oral health. How can oral health have a prevention breakthrough in terms of getting people into the office? There's people who aren't taking care of their mouths. How do you get them engaged in the process? And so maybe there's some patient engagement activities that would be helpful.

So the process of benchmarking is really very much aligned to the work that we do. You want to think about what are the benchmarks, how do you want to understand the process, planning for it, and then really studying and analyzing your results, and then learning from them, so what worked and what didn't, design and adapt, and then use those findings to arrive at the right fit adaptation. We found not every indicator has the same value to promoting your program, but certain key variables were really helpful.

Jackie, what was it? Emergency department use went down. Homeless shelter stays went down. Hunger went down.

These are key social determinants of health that are fantastic to know on an individual level. But on a system level, the city was very interesting in this, right? The ER for dental went up, yeah.

So when you're looking at the use of services, what system is going to be the one that is most impacted financially and how can you divert folks into a lower level of care? Then every jurisdiction will be interested in that, right? Because it saves money on a societal level.

So since change is certain, we're going to plan for it. So on five different types of change that we're just highlighting for the purposes of having this one-hour conversation, there's lots of other types of change. So what happens if the travel agent retires and now you're left without a tour guide? Well, you might save on the commission.

What happens if the flights are canceled? Maybe you can book at a lower rate. If you're funding-- if your tax bill is higher than you expected, maybe you have to cancel the group trip and have a staycation. But maybe that has a different level of connection that actually improves life in different kinds of ways.

If the travelers cancel, maybe now you got volume discounts are at risk. Well, maybe you invite others to join and more people are interested than were originally. And then this last one, this is a family thing where there were thousands and thousands of beautiful tulips in Hershey. And no, when we got there, there were no-- the whole family, it was, where's the tulips? They were gone.

And so the family went over to McDonald's in Hershey Park and had ice cream. And there were memories to last a lifetime because we got to make fun of them. So change is certain, and what you plan for may not happen. But that doesn't mean that you have to have a bad feeling about it afterwards.

JACQUELINE CRUZADO: And documenting those changes are important.

ALI JORDAN: Right, every step along the way. And so Jessica may remember when we called her about this because we lost our partner. We had-- in our proposal to community partners, one changed leadership. The new leadership was not interested. They were learning a lot about what was happening in the jail setting, and they didn't feel like adding a national demonstration project that was on their list of things to do.

And so we went back together with our projects, obviously, to think about what was it that we really were trying to do, which was to enhance the knowledge about housing and employment services for people coming home after incarceration and to have them engage in the process so that-- Jackie, you were talking about this. Why? It was because you said, I can't get anybody to the doctor if they don't have a place to live. I think that was what you told me.

JACQUELINE CRUZADO: Exactly, which is true.

ALI JORDAN: And so rather than saying, well, we don't have this one partner, we wound up with the health and housing consortium and with-- started at the Bronx. And they had trainings regularly. So we said, well, instead of training one partner, can we train all the housing and employment service organizations? Would that meet the spirit of what we're trying to do here to improve cultural responsiveness for people of Puerto Rican ancestry origin?

Well, the Bronx Health & Housing Consortium had many, many more folks that they were going to touch than the original partner. And so just know that instead of training dozens, we trained

hundreds. Instead of linking people from one jail in the Bronx to Bronx partners, we were able to identify-- what did you do in Puerto Rico? How did that work?

JACQUELINE CRUZADO: Well, I was able to identify a housing and employment program that will help me, assist me. When those Puerto Ricans wanted to go back to Puerto Rico, we were able to, number one, get them housing in Puerto Rico and, number two, find places where they could go to get their health care while traveling. Because there is something for us in the air bridge. So because of the air bridge, it was important for us to do that.

ALI JORDAN: And what partners did you find? How did you know where they were and whether or not--

JACQUELINE CRUZADO: Well, I--

ALI JORDAN: --do that to people coming home after incarceration?

JACQUELINE CRUZADO: Well, we partnered with a housing and employment program which-- again, housing is very important for somebody to stay healthy. So we decided to go that way. And she was a champion in Puerto Rico. She's worked in the jail settings, so she knew exactly what I was talking to. It was easy to do that.

ALI JORDAN: So you said it's easy, but I remember crying. And so there were--

[LAUGHTER]

There were-- we had the list, right? We got the list of all the federally qualified health centers and all the Ryan White community partners. And you and Carmen Cosme from One Stop Career Center went door to door. And if I remember correctly, you had a list of criteria but one that was really the most important one to you. Do you remember? It was, would I-- is this a place where I would be comfortable with my family going?

JACQUELINE CRUZADO: Yes.

ALI JORDAN: If the answer was yes, you stayed. And we added them to the list, and we wound up with lots of partners. And if the answer was no, you said thank you very much for your time and moved on, right? And so you identified linkages in Puerto Rico that did not exist across the air bridge.

JACQUELINE CRUZADO: Exactly. And not only that, but also, we documented the change. That was a big change from the Bronx to Puerto Rico. That was huge change.

ALI JORDAN: Right. So we have a little activity, I think. So we're asking you to consider possible detours, and hopefully we're going to move into small groups, and across those five sectors. So what happens if your leadership changes, organization, funding, staffing, and assumptions? Who needs to know what and when?

I think it's pretty clear. Your project officer needs to know early and often as your partner in having these things. And if you don't have a project officer like we've had through the SPNS projects but you do have a leader in your organization that's shepherding you through-- really making sure that the funder and any funding possible changes that are needed are known upfront before you make that change. So we're going to move into that somehow, some way, small groups.

Tell us what was so fun. What did you guys do?

JACQUELINE CRUZADO: Well, we were talking about different projects that are going on to sustain, how could we sustain. We talked about examples of how I changed, we changed, the Latino initiative, how that worked, stuff like that. We were just having a great conversation. I had a great group.

ALI JORDAN: Not only now do you get to hear from your group, Jackie, you can see what all the folks had to say about leadership change. Identifying champions, so important. What else did your group say?

JACQUELINE CRUZADO: I think we said the same thing.

ALI JORDAN: Identifying facilitators and barriers or new leadership. We were talking about keeping the really good idea if it's the end of administration, endure and not sharing it with the next. Introducing yourself to the new leadership and orient them, that is so great.

Then if there's organizational change, use your network. One-on-one intervention, orientations, new staff need foundations, those are so helpful. Consider better options, relook at the budget, leverage collaborative resources, identify accruals, and look for grants, really good.

Always have grants. We're always looking for grants. The question is, do you have an idea ready for the grant?

Because very often, the grant will come in very short time frame. So having sort of outlines of potential projects that you'd like to explore, so that when the funding option comes available-- and the other thing we found is that when you apply for a funding opportunity, if you don't get it, that's still a good idea. It just means you didn't find the right funding fit yet.

And so keep in mind that a good idea is always a good idea. The question is, can you find the right funding to support it that's the right fit? And it looks like we had trouble getting to the last two, so I'm going to end that.

So timing matters, right? We talked about this. If you don't ask, the answer's the same as no. So encourage you to be brave about this, to be bold, and to make it clear that really what you're looking to do is make a difference.

And so the question is not whether or not there'll be change. There will be change. But then what do you do to get by and document the change, and then move on to your next steps?

So the intervention manual, we'll talk about outputs, counting up things, training, and whatnot. We think of this as if you're traveling. Do you have-- how many stops, and how many travelers, and where will you go, and how long will you stay? And what this helps you also think about while you're making your plan is what might be some of the backup plans that you'll have along the way.

We were able to also then leverage past initiatives to build on them for the next initiative. And the last slide, we'll go through each of them. But Jackie, you started with HIV prevention in-- started with--

JACQUELINE CRUZADO: Don't say the age. Don't say the year because then you might be giving up my age, please.

ALI JORDAN: What funding was that? That was CDC funding?

JACQUELINE CRUZADO: CDC, CDC, yeah. HIV prevention, yep. No, I'm sorry, education.

ALI JORDAN: HIV education awareness. And then we got a little bit of Ryan White funding. We were able to do some work there.

There was then-- the advent of the care coordination model allowed for people to be placed out, stationed in the jails, where Achiba went on a TA call and announced that you could use care coordination funding to link people to care after incarceration. For many years, I was citing the TA call until 2018, when Melinda championed, and the HRSA folks championed, the idea of having a policy notice about this.

And to now, PCN 18-02 exists. And that's actually cited in American Public Health Association's approaches to reducing the harms of incarceration. It's also being leveraged by the House bills that are coming out for reentry services.

So each of these things has had, well, we want to say, larger and larger impacts going forward. And know that those expansions from-- in the case of jail linkages, Hampden County Public Health Model for Correctional Health was a vision for having, really, public health and community health integrated under one provider. The providers pushed in.

As a result of that, there was a jail linkages initiative. They call it Correctional Health Linkages Initiative. We were part of the 10 sites.

We've learned from one another, including the Hampton County jails. They learned from us. And that was then expanded and enhanced to additional services through the dissemination of evidence-informed intervention in Camden, Raleigh, and Las Vegas, and through the workforce initiative to Puerto Rico, where the housing and employment agency, who was already in the jails, learned how to be transitional care coordinators after incarceration.

And then through the SPNS housing and employment initiative-- thank you-- the 14-- all of the sites that were part of the housing and employment initiative had at least some of their

participants who were having histories of incarceration and additional challenges coming home as a result after incarceration. So just know that it's all building blocks.

Our final slide here is the table from the Trans-Women-of-Color-inspired paper called, what is it, "Transwoman inspires transnational approach." And it shows, really, how each of these four initiatives dovetailed. So with enhanced linkages, we found the need for someone who might want to be linked to care not in a New York City location but in Puerto Rico.

Under the Latino initiative, Jackie and Carmen walked across Puerto Rico and identified places where we might refer this person to care and created all kinds of training opportunities for people in New York and Puerto Rico to understand more about Latino populations but also more about people coming home after incarceration. Through the workforce initiative, we were able to train a housing and employment service agency, where when we-- our initial conversation was about people-- what do you think about people with HIV. And the workers, the housing employment specialists said, oh, indeed, poor baby, it's too bad they have HIV.

And at the end, I asked them the same question. It's like, well, HIV, diabetes, you can live with it. It's a difficulty, but it's nothing. You can live a long, healthy life. It's no problem. And so that kind of cultural shift is, I think, one of the things to highlight in your manuals and in your work that may not necessarily be part of your outputs but is definitely an outcome.

And then think about the Trans Women of Color, where we were not the funder but we knew folks from our collaborations. Because without Freddy Molano and the Community Healthcare Network, we wouldn't have any places to link people to care after incarceration. They established walk-in hours because we don't know when people are going to be coming home. But they said, well, just come every-- we'll be open for you every Tuesday and Thursday from 2:30 to 4:00. It turns out that was a slump time in the clinic, so they figured they could handle the volume.

And so we just made appointments for people and said the next Tuesday-- or the next time you're out, either the first Tuesday or Thursday, that's where you'll go, and that's your appointment. So we were able to make an appointment. We could document that it was kept. The day was kind of fluid, as that happens in jails.

Because of those relationships, we knew them, they knew us. They were looking to recruit for the Trans Women of Color initiative and came into the jail. And we were able to get consent and then arrange for them to have a meeting in the chapel to do an orientation session and recruitment.

So just know that these relationships, your collaborators are partners for going forward, not just for this current thing. And that will help expand your network and give you greater opportunities for making a difference.

JACQUELINE CRUZADO: And because you're collaborating and you're partners, you can actually sustain some of the stuff using your partner and your collaboration.

ALI JORDAN: Exactly. So you can see here, this is the Puerto Rico collaborative. So rather than just ending, you say, oh, now we have built this collaborative, what do you do with it? Paper directories aren't worth the paper they're printed on. This is an internet-based collaborative map. It shows all the different types.

If you really zoom in, you can see that some are suitcases, so they're employment. Some are houses. Some are signs that people have health services. But just know that this is maintained directly. It's a Google Sheet and maintained by the local folks, so that if there's updates, as there were multiple times, that they can stay in touch with one another and continue that.

Sustaining interventions is really part of what you're looking to do with these durable implementation manuals. They can live on. In fact, I strongly encourage anyone working with anyone who's a trans woman of color to take a look at the manuals. They are beautiful, and robust, and heartfelt, and great lessons for anyone who's looking to work with someone with HIV and trans from all corners of the US. Such beautiful interventions.

So just anticipate and plan for change. Be adaptable. Share all your lessons. Know that you're going to need to stay within the path that you're going, but you want to make sure that if there is a need for a detour that you can plan for that. And obviously, as you have all said over and over-- that collaborations are really key.

So Maya Angelou, this is on my five positives to one negative. I think she didn't know how to give a negative to people. And so just remember that people will remember how you made them feel, and that will help you with your collaborations and next steps with everyone you meet.

So we're looking forward to having office hours. For those of you who can stick around, we're happy to go over your specific projects or any additional questions you have for us. And then also know that we'll be back on May 23 from 12:00 to 1:30, having the final session on You've Arrived.

Thank you so much. Tools, tips, resources, they don't fit on one page anymore.

[LAUGHTER]

JACQUELINE CRUZADO: Yeah.

ALI JORDAN: Thank you all.