

Leveraging Transitional Service Delivery Models

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Learning Objectives

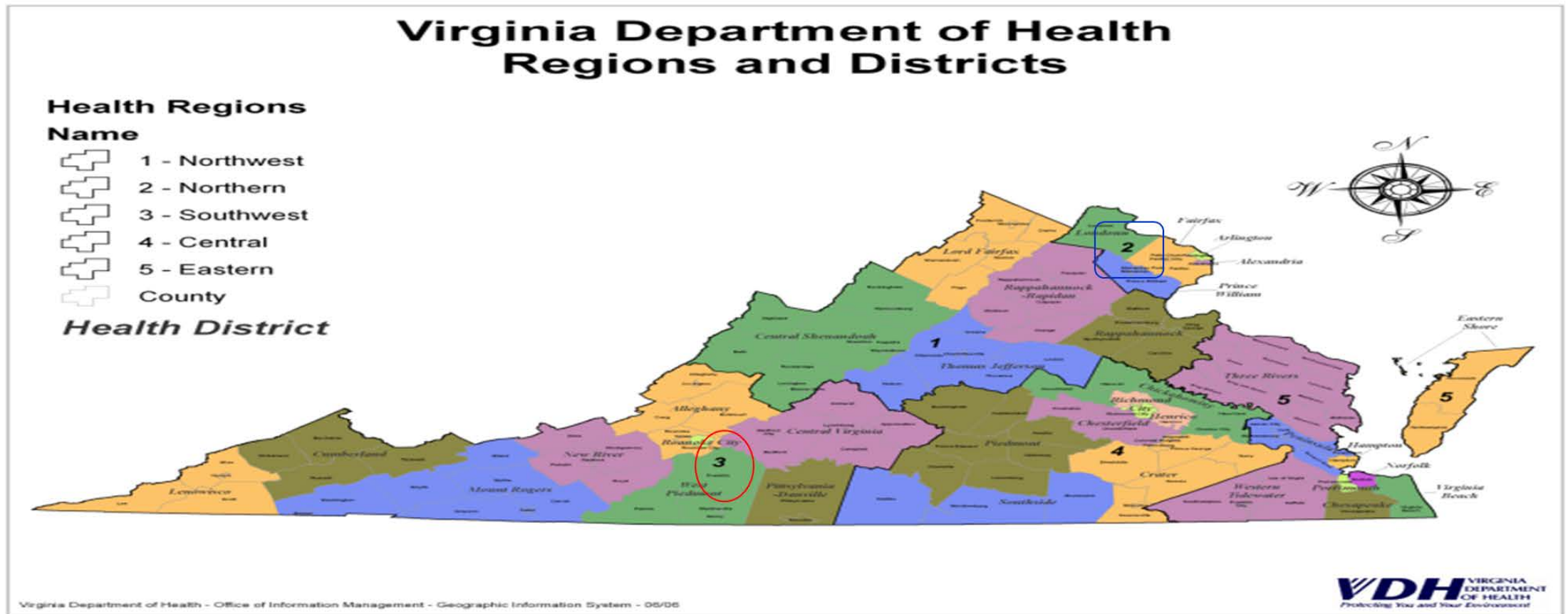
At the conclusion of this activity, the participant will be able to:

1. Describe the criteria that Virginia used to assess the need and timing to transition models of care;
2. Identify at least 2-3 activities that transition lead agency roles;
3. Describe at least one strategy to leverage infrastructure development for improved service delivery.

Introduction

- The Health Resources and Services Administration (HRSA) encouragement to transition from consortia to a direct service delivery model
- Virginia had remaining consortia in 2 of the 5 health regions in 2017
- For GY2018 the Virginia Department of Health (VDH):
 - In the Northern region, also developed a new relationship with the former lead agency to conduct varied activities that meet the goals and objectives of state's Integrated HIV Care and Prevention Plan
 - In the Southwest region, smaller consortium still, but also partnering with the lead agency to expand and provide direct services

Virginia's Health Services Regions



Northern Region

- Overview of Northern Virginia Regional Commission (NVRC)
- Previous roles for RWHAP A and B funding in Virginia
- Change in RWHAP B role
- Challenges in new role
- Successes in new role
- Preliminary outcomes

VDH's Perspective for Northern Region

- State's role in transition
- Procurement and streamlining administrative burden
- Work plan is “living document”
- Resources to support NVRC's new role
 - Still one second level provider “sub-sub recipient” with pilot of new service delivery model
- Key activities to support innovation and system strengthening
- Preliminary Outcomes

Southwest Region

- Overview of Council on Community Services (CCS) and the Drop-In Center
- Creating Capacity for Prevention & Care Model
- Lessons Learned and Successes
- Challenges
- Community Engagement
- Community Impact
- Preliminary Outcomes

VDH's Perspective for Southwest Region

- Overview of region's characteristics and state's role in transition
- Ryan White Cross Parts (B and C) Transitions
- Stakeholder engagement and relationships
- Stakeholder matrix, services, and funding mix
- Southwest "listening tour" after transition
- Preliminary outcomes

Closing Thoughts

- Transitioning models of care requires:
 - Effective and transparent communications
 - Willingness and opportunities to think creatively
 - Willingness to learn from everything with critical thinking about how to characterize what is happening—What is a success? What is a lesson learned? What do you really need to stop/start funding?
 - Thoughtful budgeting and flexible funding; constant support
 - Excellent and strong collaboration/partnerships including with HRSA PO and VDH Procurement
 - A sense of humor

Contact Information and Questions

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