



Use of Multiple Communication Strategies for Stakeholder Engagement

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Portland, Oregon Ryan White Part A TGA

Portland, OR TGA

- •5 Oregon counties, 1 Washington county
- •9 contractor sites
- •9 service categories
- •2,843 people served in FY15-16





Part A Administrative Team

•0.05 FTE Sr. Manager

- •1.0 FTE Program Manager
- •1.0 FTE Contracts Program Specialist
- •0.25 FTE Quality Management Program Specialist
- •0.8 FTE Research/Evaluation Analyst II
- •0.5 FTE Research/Evaluation Analyst II
- •0.5 FTE Financial Administrative Analyst
- •0.5 FTE Office Assistant Sr.

•4.6 Total FTE

•8 People



Learning Objectives

- 1. Facilitate interactive activities to explain HAB/HHS measure definitions.
- 2. Adapt communication methods to effectively engage stakeholders.
- 3. Identify communication barriers with providers, consumers, or other community partners.
- 4. Describe technology that can be used to administer Ryan White programs.



Examining Communication

•Feedback from Contractors' Survey

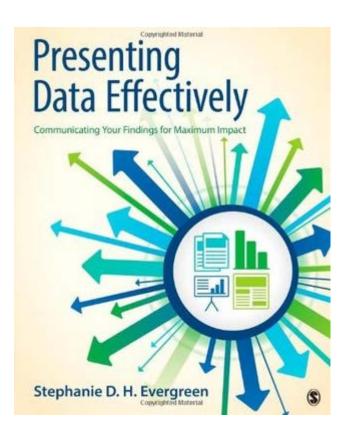
Planning Council Needs

•Changes in staff

New ContractorsNew Part A Admin Team

•Build Capacity

Constant Evolvement





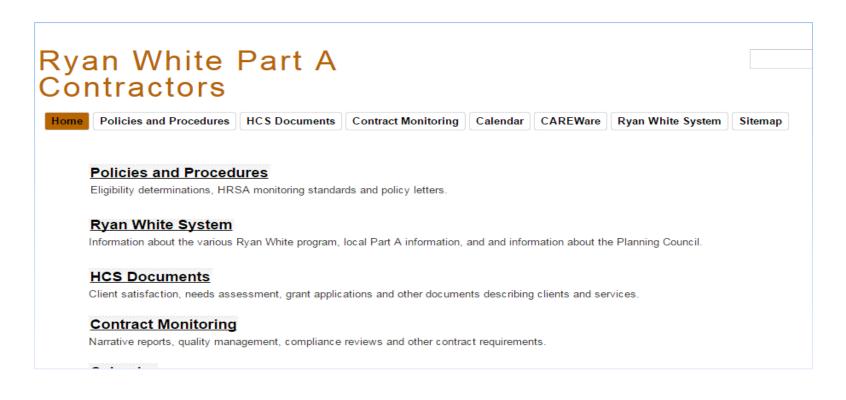
Communication Platforms for Program Administration

- Contractors' Website
- Quarterly Contractor Meetings
- •New Employee Orientation
- •WebEx for Data System (CAREWare) Trainings
- •Examples of Participant Activity & Data Reports



Contractors Website

•https://sites.google.com/a/multco.us/ryan-white-part-a-contractors/?pli=1





•Quarterly Contractors Meetings

•https://sites.google.com/a/multco.us/ryan-white-part-a-contractors/reporting-schedule/meetings

•Agenda Items:

Introductions & Announcements
Part A Updates
Quality Management Training/Activity
CAREWare Update/Training
Client Data Presentation
Meeting Evaluation
Networking





•New Employee/Contractor Orientation

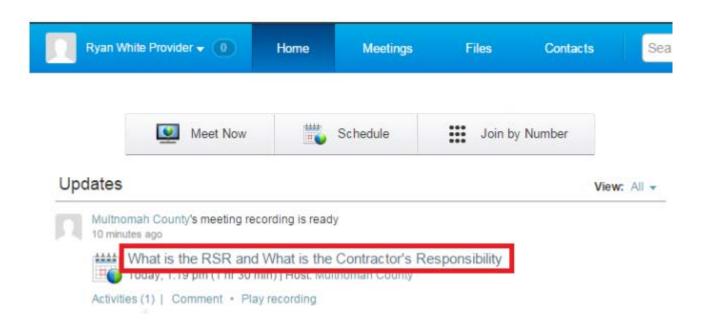
- •Contractors Website
- •Overview of RW Funding
- •Contracts
- •Eligibility
- •Financial
- •CAREWare
- •RSR
- •Monthly Reports
- •Site Reviews
- •Quality Management •Q&A





•WebEx for Contractor Training

•https://sites.google.com/a/multco.us/ryan-white-part-a-contractors/careware





Activity-Gap in HIV Medical Care

Numerator

Number of clients in the denominator who did not have a medical visit in the last 6 months of the measurement year.

Denominator

Number of clients with a diagnosis of HIV who had at least one medical visit and one RW service in the first 6 months of the measurement year.



Providers,

Please enter your RW Funded Services into CW



Clients with Medical Visits in the 1st 6 mos,

Please move to the Denominator



This is the Denominator

Lets count the clients and record the number



Clients with Medical Visits in the 2nd 6 mos,

Please move to Not in Numerator



Clients with NO Medical Visits in the 2nd 6 mos,

Please move to the Numerator



This is the Numerator

Lets count the clients and record the number



Lets calculate how many clients have a gap in their care.



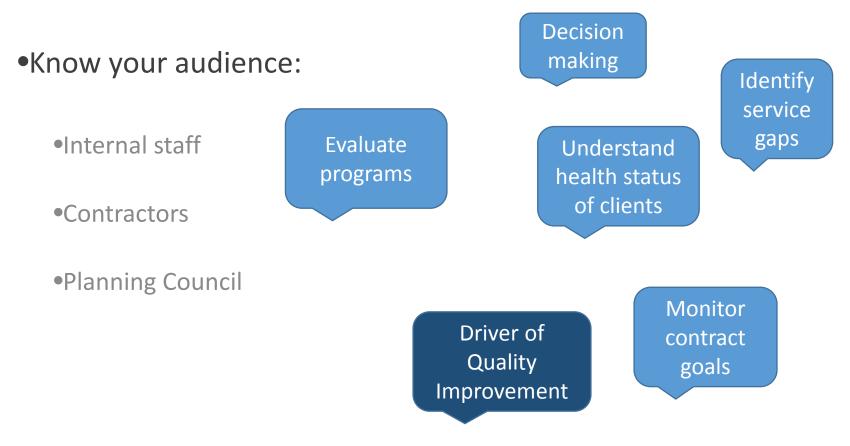
Lets look at who are the clients in the Numerator



Lets look at the clients that did not make it into Denominator



Presenting Data







Presenting Data: Formats

•Presentations (council and contractors)

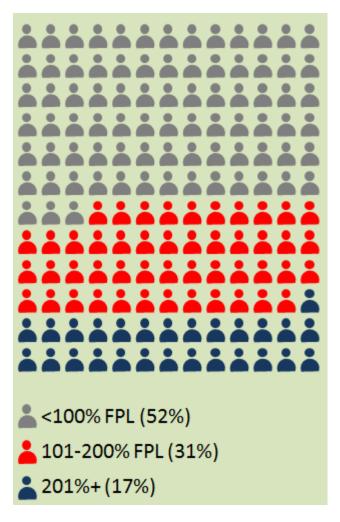
•Data Summaries (ad hoc and routine)

•Reports



Presenting Data: Presentations

Income (FPL)	N	%
<100%	1565	56
101-200%	868	31
201-300+%	366	13
Missing	180	





Presenting Data: Reports

Summary of Findings

People Living with HIV/AIDS in the TGA

The highest concentration of HIV/AIDS cases in Oregon is in the Portland metropolitan area, with the majority of cases being located in Malmomah County. As of the end of 2007, close to 4,000 people were estimated to be living with HIV/AIDS in the TGA (n=3,971).

Though males represent the majority of the epidemic (89%), females account for an increasing percentage of HIV (non AIDS) cases. As of the end of 2007, women comprised 14% of HIV (non AIDS) cases, while accounting for only 9% of all AIDS cases. The majority of PLWH/A in the TGA are white, non-Hispanic (80%). However, HIV/AIDS continues to disproportionately affect the African American/Black community. The prevalence rate among African American/Blacks is approximately 3 times higher than Whites.

Unmet Need in the TGA

Each year, an estimate is generated of PLWH/A who have an unmet need for medical care, as indicated by the lack of CD4 or viral load testing. These estimates have become more accurate as Oregon rule changes made all viral load and CD4 results reportable to State surveillance. These estimates show that closes to three out of four PLWH/A in the TGA. (73%) have accessed medical care in Oregon in 2007. Among Part A clients, 92% had received CD4 or viral load testing in Oregon in 2007.

In a needs assessment survey conducted in late 2008, at least one in two TGA clients reported outpatient medical care, health insurance, dental care, case management, financial assistance for housing, and mental health counseling as their top service needs. Close to one-fourth of respondents reported gaps in dental care. Other top service gaps included financial assistance with housing and other housing help, case management, mental health therapy and support services. In 2009, a series of community forums with clients were initiated to betier understand what difficulties or barriers consumers faced in accessing these services. Primary barriers in accessing dental, housing, mental health, psychosocial and food services were described, including service inconvenience, such as appointment times scheduled far out, incorvenient timing of services and classes (e.g. during working hours only, etc.), and services being closed during certain days. Participants also described poor provider communication, not knowing what services were invailable and fluctuations in provider quality as barriers to services.

Ryan White Part A Client Characteristics

In 2008, 2,548 clients received services through Part A-funded providers, an increase of 238 clients served from 2007 (n=2,310). Part A clients in 2008 represent close to two-thirds of all TGA cases (64%). As a system designed to fill gaps for low-income PL/WH/A, the Part Afunded system of care generally over-represents vulnerable and special needs populations. As observed in the past three years, females and racial/ethnic minorities received Part A-funded services in 2008 in greater proportion than their nepresentation in the epidemic.

Part A clients continue to be severely affected by poverty, lack of stable housing, and reductions in publicly-funded insurance and medication programs. At the end of 2008, close to one-fifth of clients did not have permanent housing (18%). A higher percentage of Black/African-American Clients (29%) are without permanent housing in comparison to other racial/ethnic groups. Approximately 70% of clients had incomes at or below 100% of the federal poverty level (FPL), while 13% did not have medical insurance coverage at the end of 2008. However, over the course of the year, an estimated one in four clients was uninsured (24.4%) at some time.

Client Acuity

Acuity scores are a reflection of the severity of client needs; higher acuity scores indicate greater client needs. A higher percentage of female clients had acuity scores 29 and above (44%) in

HIV Care Services Annual Report EXECUTVIVE SUMMARY

HIV Care Services administers the Health Resources Services Administration (HRSA) Ryan White Part A grant to the Portland Metropolitan Area. The Part A grant provides funding to local contractors who provide a range of services to persons living with HIV/AIDS.

Service Category with largest

Medical Case

Management

represented 35% of award

Number of Ryan White Part

Number of NEW Ryan White

Top 3 Services utilized by the

most number of clients

Med Case Mgt 2,224 (72%)

Anbulatory 1264 (42N

A clients served

Part A clients

361

2,979

Number of Ryan White

Contractors in the TGA

11

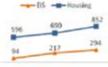
% of award



Percentage of RW clients Medically Engaged



Service Categories where number of clients have increased since 2012



FY12-13 FY13-14 FY14-15

Service Category with the highest percentage of Medical Engagement

Mental Health (91%)*

*The only service category to exceed the TGA goal of 90%

The most commonly cited unmet need

Dental Care (23%)* *As reported by the OMMP for 2013-2012



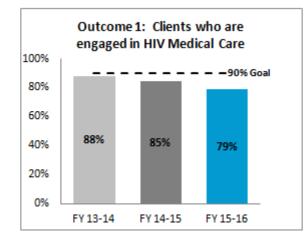
Presenting Data: Summaries (ex. 1)

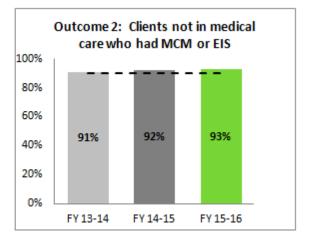
Outcome (March 1, 2013 - Feb 28, 2014)	Who Completes	Numerator	Denominator	Percent	Goal
1. Clients who are engaged in HIV medical care	CAREWare				
a. Clients who have 2 medical visits		25	30	83%	90%
b. Clients who do Not have 2 medical visits		5	30		
c. Clients not in medical care who had MCM or EIS services		3	5	60%	90%



Presenting Data: Summaries (ex. 1)

	FY 13-14FY 14-15293 Total Clients Served292 Total Clients Served243 Psychosocial Clients Served247 Psychosocial Clients Served				FY 15-16 281 Total Clients Served 236 Psychosocial Clients Served							
Outcome	Numer	Denom		Goal	Numer	Denom	%	Goal	Numer	Denom	%	Goal
*Clients who are engaged in HIV Medical Care	94	107	88%	90%	110	130	85%	90%	105	133	79%	90%
^Clients not in medical care who had MCM or EIS services	10	11	91%	90%	24	26	92%	90%	26	28	93%	90%







Presenting Data: Summaries (ex. 2)

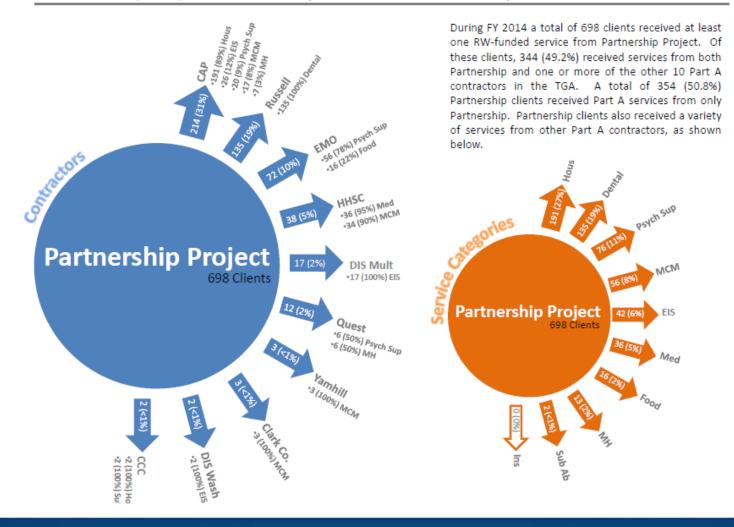
	*C/	AP	сс	с	*Cla	ark	*DIS	Mult	DIS V	Vash	EN	10	*HI	HSC	Ρ	P	Qu	est	Russ	ell St	Yam	hill	Total Clients	Total (who O	
	Clients	%	Clients	%	Clients	%	Clients	%	Clients	%	Clients	%	Clients	%	Clients	%	Clients	%	Clients	%	Clients	%	Clients	Clients	%
CAP	237	24.8%	16	1.7%	18	1.9%	41	4.3%	1	0.1%	188	19.6%	443	46.3%	214	22.4%	42	4.4%	178	18.6%	2	0.2%	957	720	75.2%
CCC	16	80.0%	0	0.0%	0	0.0%	2	10.0%	0	0.0%	12	60.0%	14	70.0%	2	10.0%	2	10.0%	3	15.0%	0	0.0%	20	20	100.0%
Clark	18	5.1%	0	0.0%	300	85.0%	0	0.0%	0	0.0%	5	1.4%	6	1.7%	3	0.8%	9	2.5%	21	5.9%	0	0.0%	353	53	15.0%
DIS Mult	41	27.0%	2	1.3%	0	0.0%	68	44.7%	0	0.0%	7	4.6%	58	38.2%	17	11.2%	0	0.0%	14	9.2%	0	0.0%	152	84	55.3%
DIS Wash	1	11.1%	0	0.0%	0	0.0%	0	0.0%	6	66.7%	0	0.0%	1	11.1%	2	22.2%	0	0.0%	0	0.0%	0	0.0%	9	3	33.3%
EMO	188	65.7%	12	4.2%	5	1.7%	7	2.4%	0	0.0%	24	8.4%	164	57.3%	72	25.2%	15	5.2%	82	28.7%	1	0.3%	286	262	91.6%
HHSC	443	33.7%	14	1.1%	6	0.5%	58	4.4%	1	0.1%	164	12.5%	633	48.1%	38	2.9%	38	2.9%	252	19.2%	0	0.0%	1315	682	51.9%
PP	214	30.7%	2	0.3%	3	0.4%	17	2.4%	2	0.3%	72	10.3%	38	5.4%	354	50.7%	12	1.7%	135	19.3%	3	0.4%	698	344	49.3%
Quest	42	41.6%	2	2.0%	9	8.9%	0	0.0%	0	0.0%	15	14.9%	38	37.6%	12	11.9%	25	24.8%	24	23.8%	0	0.0%	101	76	75.2%
Russell St	178	25.1%	3	0.4%	21	3.0%	14	2.0%	0	0.0%	82	11.6%	252	35.5%	135	19.0%	24	3.4%	257	36.2%	2	0.3%	709	452	63.8%
Yamhill	2	33.3%	0	0.0%	0	0.0%	0	0.0%	0	0.0%	1	16.7%	0	0.0%	3	50.0%	0	0.0%	2	33.3%	0	0.0%	6	6	100.0%

^TGA HIV Care System: Client Overlap (N=3,024) FY 2014: 3/1/14 to 2/28/15



Presenting Data: Summaries (ex. 2)

Partnership Project: FY 2014 Ryan White Client Overlap

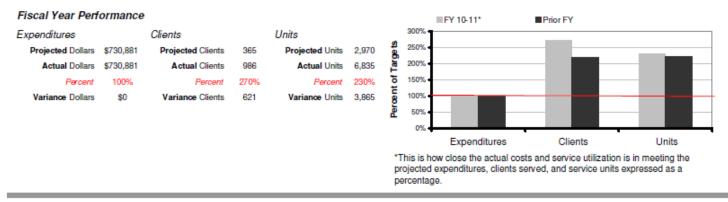




Presenting Data: Summaries (ex. 3)

Outpatier	Outpatient Medical Care FY 10-11: March 1, 2010 - February 28, 201											
Priority	TGA Award	Initial Allocation	Reallocation	Total Allocation	% of Award	Carryover	Final Allocation					
1	\$3,100,056	\$730,881	\$0	\$730,881	23.6%	\$0	\$730,881					

Service Definition: Provision of primary and HIV medical care at specialty clinics that follow national standards of care for the treatment of HIV. Care includes diagnosis and treatment of physical and mental health conditions, medication management and adherence counseling, medical care coordination, and referral to other specialty providers and linkage to case management services.



About Current Performance: Additional Information for Consideration

- Fiscal: At our largest Part A HIV clinic, 73% of clients had under-insured visits and these under-insured visits were 59% of all visits. Under-insured is defined as any visit where reimbursement is less than 50% of the Federally Qualified Health Center (FQHC) wrap-around rate, currently \$241.
- Program: The two funded clinics served 1,325 clients in FY 10-11, a 10% increase over FY 09-10. Similarly, the number of uninsured and under-insured medical care clients increased by 13%, from 805 clients in FY 09-10 to 986 clients in FY 10-11. The results of Part A medical clinics' efforts to help clients remain engaged in care and achieve positive medical outcomes include:
 - 90% of Part A clients receiving primary medical care had stable or increased CD4 counts (>200/ul), exceeding the target goal of 80%.
 - 99.8% of clients who had an HIV diagnosis at their first medical visit did not progress to AIDS by their last visit in FY 10-11, exceeding the target goal of 93%.
 - 89% of clients were maintained in care, just under the TGA benchmark to maintain 90% of clients in care, as measured by the number of clients at the last visit that had an HIV primary medical care visit in the previous six months.
 - Only 1% of medical care clients were lost to follow-up, well under the target of no more than 5% of clients leaving care with no explanation.
 - An analysis of the recent client satisfaction survey determined that among respondents who had a current primary health care provider for HIV, 95% said that provider was very or somewhat accessible.



Presenting Data: Summaries (ex. 3)

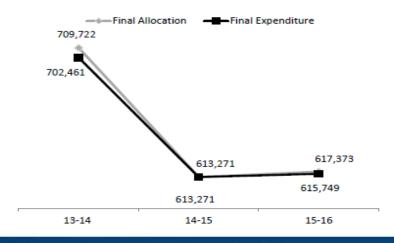
Ryan White grant year: 3-1-15 to 2-29-16

Section 1 FY15-16 Allocations

Initial Allocation	Reallocation	Carryover	Final Allocation	% of Award	TGA Award
\$599,873	\$	\$17,500	\$617,373	18%	\$3,505,035

Section 2 Allocation History

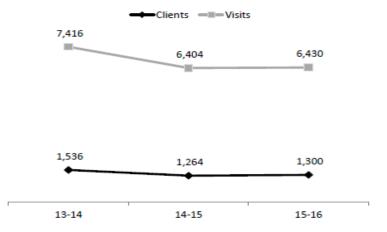
Fiscal	Initial	Final	Final	%
Year	Allocation	Allocation	Expenditure	Spent
15-16	\$ 599,873	\$ 617,373	\$615,749	100%
14-15	\$ 683,736	\$ 613,271	\$613,271	100%
13-14	\$ 719,722	\$ 709,722	\$702,461	99%



Section 3 FY15-16 Performance

	# Served	Target	%
Clients	1,300	1,225	106%
Visits	6,430	n/a	n/a

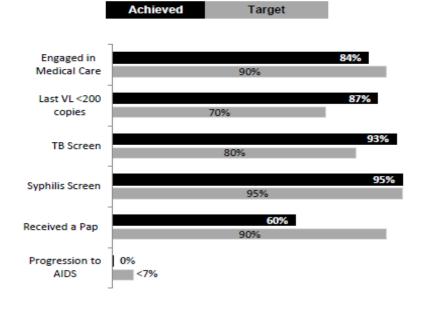
Performance History





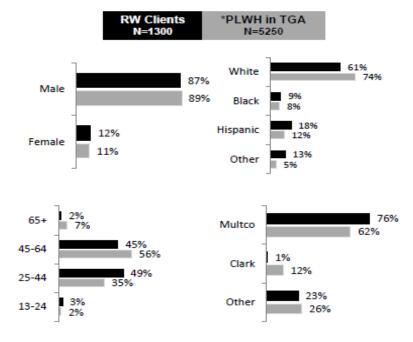


Section 4 Outcomes



Ryan White grant year: 3-1-15 to 2-29-16

Section 5 Demographic Distribution



*PLWHA in TGA: Surveillance data collected from the State of Oregon and Clark County, WA as of 12-31-14

Section 6 Grantee Comments

Fiscal:

- The cost per client is \$474 from Part A. This does not include other funding sources such as insurance billed, Part C, D and SPNS
- The SPNS grant is ending in July 2017. The SPNS grant pays for 2 navigators based at the Part C Clinic.

Program:

- The average number of visits per client is 5 visits.
- The medical provider conducted a trauma informed organizational assessment and created a committee to work on improving services with a trauma informed lens.



Communication Brainstorm

- •What's going well in terms of communicating information to contractors, planning bodies, clients, the community, government, or any other stakeholders?
- •Where are the opportunities for improvement?
- •What resources do you need to make improvements to communication methods?
- •Timeline/plan



Thank you!

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