



FY24 Provider Meeting

Ryan White
Services Division

05/01/2024



Agenda

- Welcome & Introduction
- Infectious Disease Bureau
- Ryan White Services Division
 - FY 23 Summary
 - Reporting Deadlines
 - Documents Update
 - Projects & Collabs
 - Site Visit Update
 - Site Visit Evaluation
 - RFP
- Clinical Quality Management
- e2Boston
- Planning Council
- Ryan White Dental Program
- Community Resource Initiative
- New Hampshire CARE
- New England AIDS Education and Training Center
- Case Management Training Program
- Justice Resource Institute Training
- Questions & Close

Break

Knowledge checks will be given throughout the presentation.

A high-angle, top-down photograph of a group of people sitting around a wooden table. The image is cropped to show mostly arms and hands reaching across the table, suggesting a collaborative meeting or workshop. The people are wearing various casual and business-casual clothing like jeans, button-down shirts, and sweaters. The lighting is warm and natural, coming from the side.

Ground Rules

- Please keep yourself muted.
- Having your cameras on is encouraged but not required!
- We will **not** be taking questions during the presentations but during a designated time block. Please write down any questions or comments in the chat.
- Be respectful.
- Be considerate.
- Be present.

Meet the Team



Bisola

Executive Director of
BPHC



Tegan

Int. IDB Director



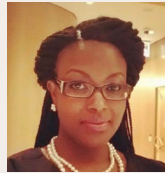
Tegan

Associate Bureau
Director



Regis

Bureau Administrator



Soane

Fiscal Manager



Monica

Fiscal Coordinator

Angela

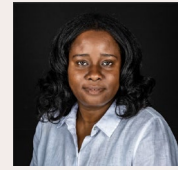
Fiscal Coordinator



Fiscal

Frantzou

Dir. Sub. Compliance



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RWSD

Meet the Team



Draft



Meet the Team

HIV Services Division
Division Director



Irina
Data Manager

Melanie
Director of Client Services



Ryan White Dental

Ryan White Planning Council

Director of Prevention and Early Intervention Services

CQM

Client Services

TBH
Sr. Program Manager

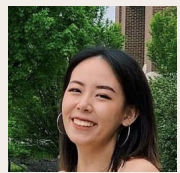
Tzuria
Sr. Program Coordinator



Alexandria
Sr. Program Coordinator



Roxy
Program Coordinator II



Glendalys
Program Coordination II



PCIII

PCII

PCII



Infectious Disease Bureau

Tegan Evans

05/01/2024

Infectious Disease Bureau

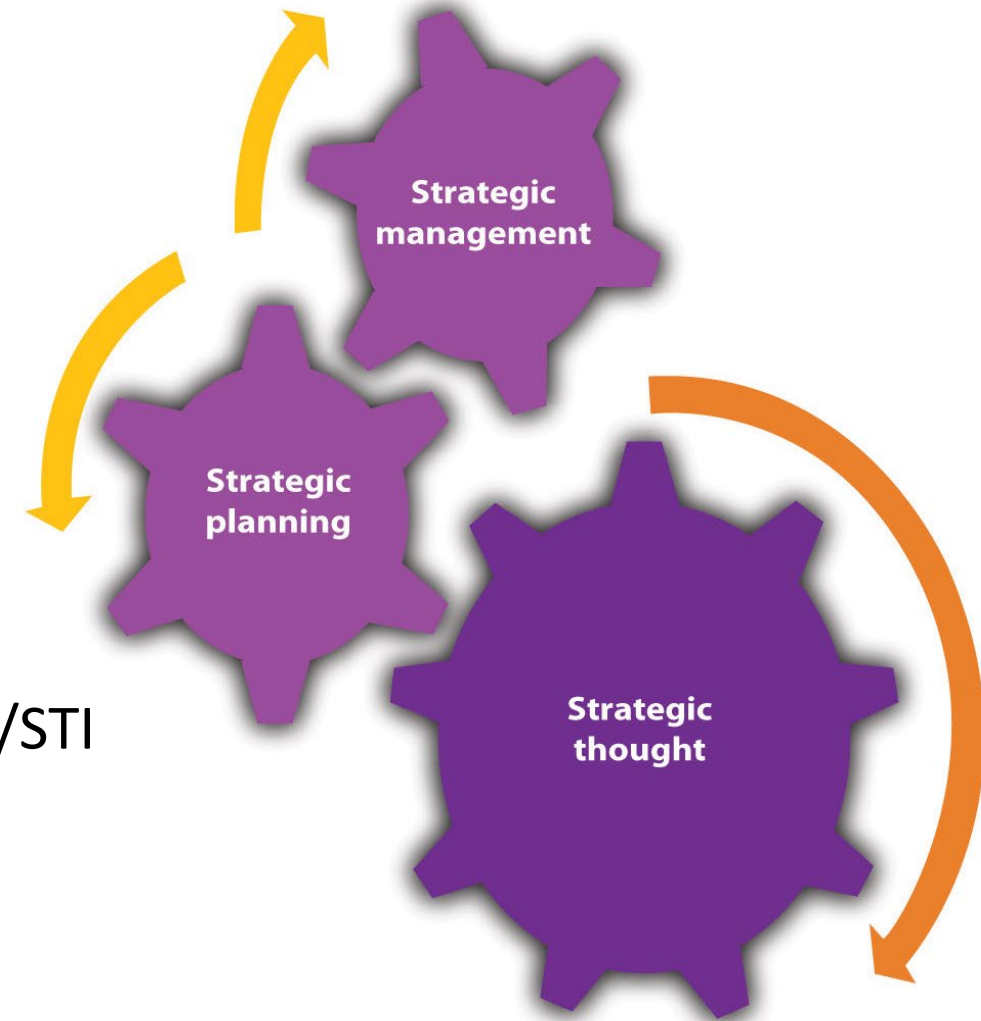
Strategic Vision

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STRATEGIC APPROACH

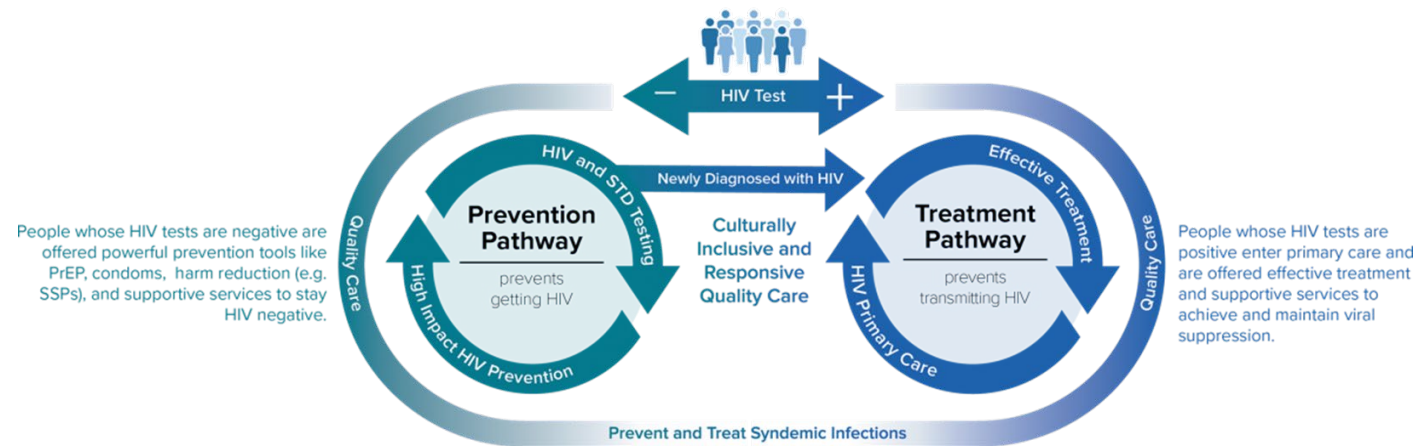
- ✓ Evaluating needs of the current HIV epidemic and service gaps across Boston EMA
 - ✓ Surveillance and programmatic data
 - ✓ Comprehensive needs assessment
- ✓ Combatting stigma and health inequities across HIV/STI prevention and treatment programming
- ✓ Adopting a status neutral approach towards HIV care continuum
 - ✓ Restructuring of programming to ensure alignment across funding streams
- ✓ Reviewing internal processes for equity & efficiency to better serve our staff, partners, and residents



Challenges

- Despite progress, disparities remain, and HIV continues to disproportionately impact MSM and women of color
- Black, Latino, and White gay and bisexual men and Black heterosexual women bore the greatest burden of new HIV in 2021 across the US
- Effective treatment and prevention are **not** adequately reaching people who need it the most.

Status Neutral HIV Prevention and Care



Follow CDC guidelines to test people for HIV. Regardless of HIV status, quality care is the foundation of HIV prevention and effective treatment. Both pathways provide people with the tools they need to stay healthy and stop HIV.



Current Investments

BPHC's funding and initiatives

- HRSA Ryan White HIV/AIDS Program
 - Supports income-eligible people living with HIV to receive medical care, medication assistance, and essential support services to stay in care
- Ending the HIV Epidemic
 - BPHC funded for pillars 2 and 4: Treat and respond
- City community-based **prevention** funding for HIV and STIs



GOAL 1

Prevent New HIV Infections.



GOAL 2

Improve HIV-Related Health Outcomes of People with HIV.



GOAL 3

Reduce HIV-Related Disparities and Health Inequities.



GOAL 4

Achieve Integrated, Coordinated Efforts That Address the HIV Epidemic Among All Partners.



Prevention

- \$1.4 million
 - Community-Based Prevention funding to enhance education and outreach efforts related to HIV, Hepatitis C, and STIs (ex. HIV screening)

Linkage to Care & HIV Treatment

- ~\$15M in Ryan White Part A funding for HIV continuum of care.
 - Provide care, treatment and support for low-income PLWH
 - Funds Core Medical and Support Services across 10 counties in Mass and NH.
 - 31 Sub-recipients
- ~2.2M Ending the HIV Epidemic (EHE)
 - Link individuals with HIV to care, support and treatment services.
 - 4 Pillars: Diagnose, **Treat**, Prevent and **Respond**
 - Funded 6 sub recipients across Suffolk County in FY23.

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HIV Needs Assessment

Assessment Goals

- Garner a clear understanding of unmet needs in regards to HIV in Boston.
- Deepen our understanding of inequities
- Align and maximize our resources
- Identify organizational improvements



Next Steps

- ▶ Community Process to disseminate findings and identify priority strategies.
- ▶ Development of a stakeholder oversight board
- ▶ Fund low hanging fruit
 - ▶ Increase access to culturally and linguistically relevant HIV materials and messaging
 - ▶ Increase provider and consumer competency across priority topics, including cultural humility, trauma informed care
 - ▶ Expanding the flexibility of city dollars
 - ▶ Understand barriers to RAPID START
 - ▶ Expand funding for core medical and support services that serve to link, engage, and/or re-engage priority populations in care.
 - ▶ Expand access to diagnosis and prevention in new and non-traditional settings in Boston's most impacted zipcodes: 02118, 02119, 02121, 02124, 02125, 02128, 02131, 02136

Education and Community Engagement

UPCOMING CAMPAIGNS & RESOURCES

MAKE A DATE WITH YOUR HEALTH CLINIC

ECE/IDB is working with theSTUDIO, to develop authentic, empowering, and sex-positive messaging to advocate for HIV and STI awareness, testing, and treatment through spring and summer using a variety of multi-media platforms.

Our landing page is accessible via QR codes on our educational HIV and STI prevention palm cards and makes finding testing and treatment sites for HIV and STI's around the city easy. The page also includes information about mpox vaccination resources as well as PrEP and community partners and resources.



FUN NIGHTS. SMART CHOICES.

PROTECTING YOURSELF PROTECTS US ALL.

Down to host.
I'm on PreP and
got tested yesterday.

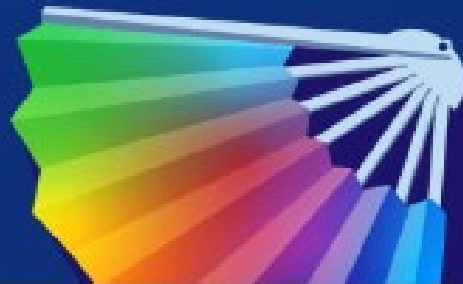


Make a date with your Health Clinic
SafelsSexyBoston.com



MAKE A DATE WITH YOUR HEALTH CLINIC.

Visit SafelsSexyBoston.com



SLAY PRIDE. PLAY SAFE.

SAFE SEX KEEPS OUR COMMUNITY HEALTHY.

You're gorgeous,
funny AND you
play safe? Where
have you been
all my life jajaja



Make a date with your Health Clinic
SafelsSexyBoston.com



THANK YOU



Ryan White Services Division

Melanie Lopez

05/01/2024

Provider Information

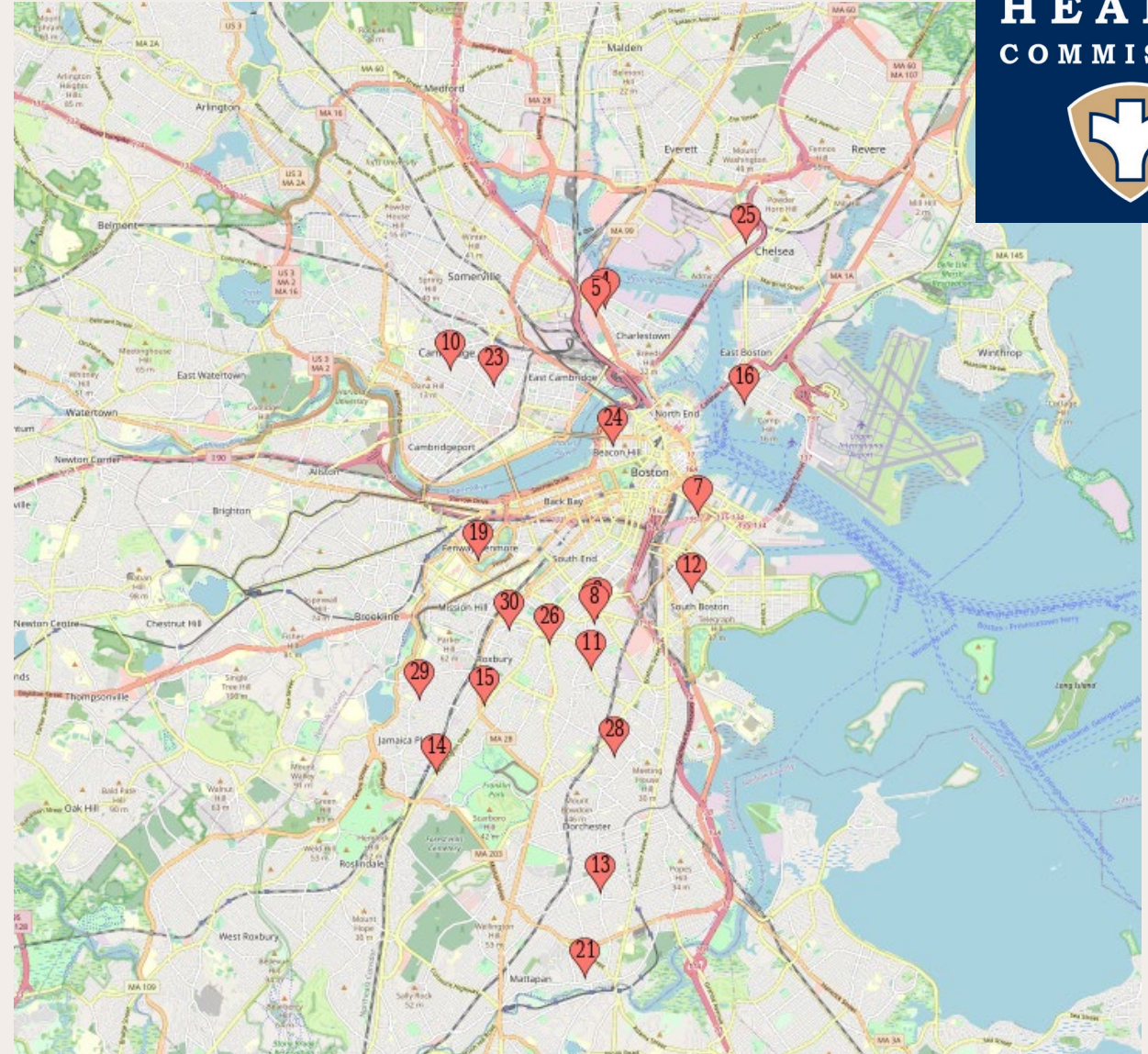
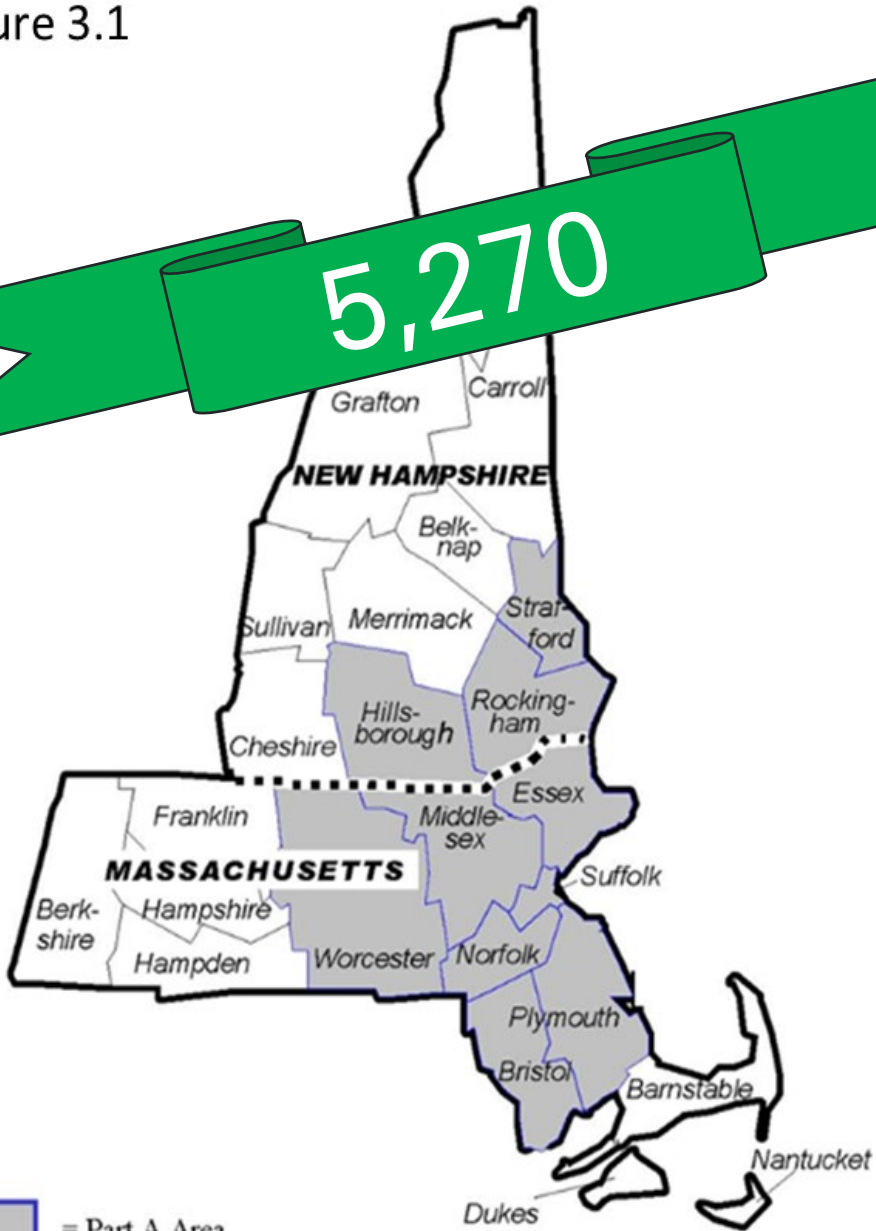


Figure 3.1

Boston EMA Fast Facts



5,270



Source information: e2boston.net

Service Category	Number of Clients Served
Oral Health	2,290
Medical Case Management	1,886
Medical Transportation	762
Non-Medical Case Management	757
Foodbank/Home-Delivered Meals	727
Medical Nutrition Therapy	551
Psychosocial Support Services	514
Housing	422
Emergency Financial Assistance	319
Health Education and Risk Reduction	316
Other Professional Services – Legal	98
AIDS Drug Assistance Program*	25
Linguistic Service	24

Spending Update

95% Spent!

75 – 80%

Non-Medical Case Management

81 – 86%

Medical Transportation

Psychosocial Support Services

Emergency Financial Assistance - MAI

87 – 91%

Medical Case Management

Health Education Risk Reduction

Other Professional Services Legal- MAI

92- 95%

Housing

Psychosocial Support Services – MAI

Other Professional Services Legal- MAI

96- 100%

Medical Nutrition Therapy

Oral Health

Other Professional Services- Legal

Medical Case Management – MAI

Emergency Financial Assistance*

AIDS Drug Assistance Program *

Foodbank/Home-Delivered Meals*

Non- Medical Case Management – MAI*

Linguistic Services – MAI*





Reporting Deadlines FY 24

The fiscal year runs from March 1, 2024, to February 28, 2025



**RFP
Year!**

Monthly Deadlines

- E2boston data should be entered *at least* once a month
- Invoices are required to be submitted **30 days after** the end of the month

Yearly Deadlines

- RSR covers data from **January 1, 2024**, to **December 31, 2024**
- Outcomes measures are entered every **6 months***
- Final date to submit the budget revision is **December 15th**

** dependent on client timelines*

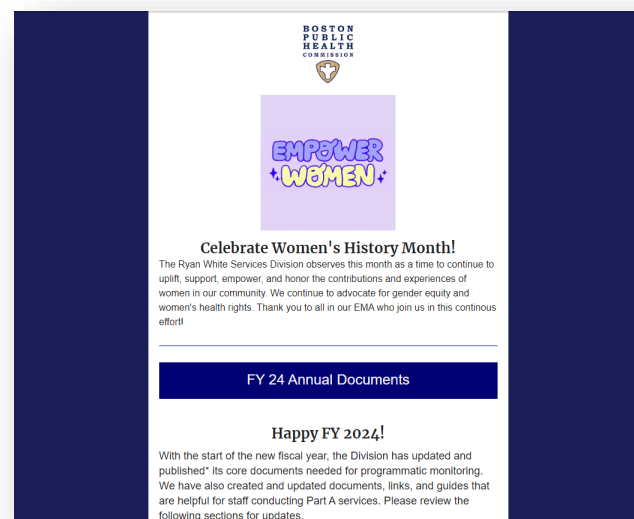


Documents and Resources

- RWSD Newsletter
 - RWSD Updates
 - Fiscal Reminders
 - e2Boston Updates
 - CQM Updates
 - EMA Opportunities
 - Events
 - Job Postings

[Click here to access the website](#)

[Sign up for our Newsletter!](#)



- Target HIV Website
- HRSA Part A Manual
- PCN 16-02
- PCN 15-02
- Client Services Handbook
- Provider Manual
 - Summary of Changes
- Services Standards
 - Summary of Changes
- Scopes of Services



Collaborations



Ryan White Services Division Data Importing Policy Request Form

Please complete the following form and submit to RWSD's Data Manager to determine if your agency qualifies for the data importing module.

Agency:
Participants Completing Form:

Data Infrastructure Capacity
Please complete the following questions to evaluate your agency's data infrastructure capacity for data importing.

Projects

- Coverage and Data Overlap booklet
- Training Certification Form
- Data importing Policy
 - Data Infrastructure Capacity
 - Staff Infrastructure
 - History of Data Quality
 - History of Timely Data Submission



Site Visit Update

- Last year we resumed the site visit process.
- They will continue to be on an **ANNUAL** basis.
- Our PCs will be coordinating this process after the Provider Meeting.

The confirmation packet includes the following items:

- Site visit confirmation letter with date and time of site visit
- Agenda
- Monitoring Tool
- List of required documents to be submitted prior to the visit

The contract manager may schedule a call to review the agenda, site visit preparation, and coordinate planning for the site visit logistics.

FY 23 [REDACTED] Part A Site Visit Confirmation

5b. Client File Review Worksh... 34 KB
 Pre-Site Visit Document Che... 144 KB
 1c. Monitoring Tool (1).docx 76 KB

1b. Confirmation Letter_ [REDACTED] 128 KB

4 attachments (382 KB) Download all

Dear [REDACTED] Partners,

Attached is a letter confirming the date of your site visit for FY 2023. [REDACTED]'s site visit will be on Tuesday, **February 13, 2024, starting at 10 AM in person** at [REDACTED]. The Fiscal portion of the site visit will be conducted **online**. We will be following up with you and the fiscal representatives during the pre-site visit call to schedule a time that works best during the visit day. Please note that the agenda and the client codes for the visit will be sent and reviewed with you during our Pre-Site Visit phone call.

Additionally, we ask that you fill out Section A-E of the attached site visit monitoring tool, as well as the necessary fiscal documentation, and return it to me by **the end of the day on February 6**, one week before your site visit, as requested in your confirmation letter. You will be receiving calendar invitations for both the Pre-Site Visit Phone Call and Site Visit shortly. Please let me know if you have any further questions or concerns.

Meeting/Deliverable	Date
Monitoring Tool Due	February 6, 2024
Pre-Site Visit Phone Call	February 8, 2024
Site Visit	February 13, 2024



Statement	Strongly disagree	Disagree	Somewhat disagree	Neither agree or disagree	Somewhat agree	Agree	Strongly agree
I had the opportunity to communicate my programs/roles with RWSD/ my contract manager.	1	2	3	4	4	16	10
Both RWSD and JSI communicated effectively regarding any outcomes during and after the Site Visit.	0	1	2	1	1	19	16
The JSI team communicated clearly and respectfully during any Site Visit activity.	1	0	1	5	4	17	11
Follow up needed.							



Site Visit Update

Statement	Average
Organization of the Pre-site Visit Call	7.11
Organization of the Site Visit Agenda	7.45
Chart Review Procedure	7.45
Policy Review Procedure	7.00
Fiscal Review Procedure	5.89



Site Visit Update

Client chart worksheet was clear and easy to use. Pre-site visit check list on program and (partial) fiscal information was fine but some information was not clear. The initial check list w/ fiscal documentation was provided with enough notice however the fiscal monitoring tool used during the site visit was not provided. ***

Specific request was made to be able to attend both clinical and fiscal site visits well in advance, but the site visits happened simultaneously, preventing the ability to attend both. Pre site checklist did not include all of policies and questions necessary for site visit. Many of the questions during the fiscal site visit were not presented in planning process. ***

The agency should provide expected standards or statements to be included in the policy statements. That way, review can be more simpler and the clients would know what is expected of them. ***

Programmatic site visit was well planned and coordinated, with plenty of time for preparation. Actual fiscal visit went smoothly but the lead-up, process and communication was not good. ***

The exit conference could have included strengths of our program; it only focused on findings and what needed to be rectified. Providing feedback regarding strengths is as important as weaknesses. ***

Feedback Review



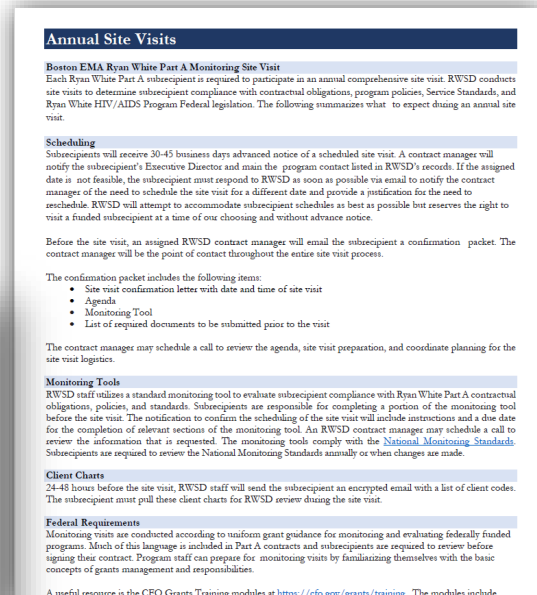
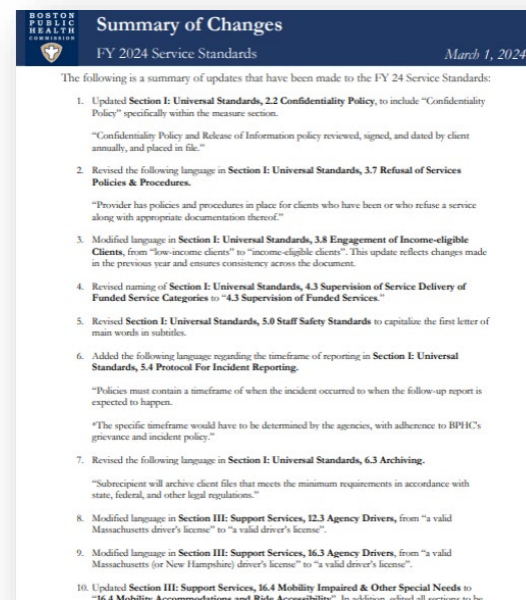
Site Visit Update

- RWSD will be leading the visits
- Program and Fiscal will be on the same day and both IN-PERSON
- All agencies will have 30 days notice to collect required documentation
- Timeline: PCs will start coordinating in May for June and beyond
- Pre-site visit call will not include introductions
- In FY 23, in-depth review of policies and charts for the program portion
 - in FY 24 we will check any policies that had outcomes listed in the FY 23 report and continue with the in-depth chart review
- There will be a data quality component
- Snow plans
 - Held them online in FY 23 → in FY 24 we will reschedule the date



Site Visit Update

- For FY 24, please review the summary of changes for the service standards, to see if there is any additional policies needed for this fiscal year.
- Please ensure all outcomes from the FY 23 report are addressed prior to your FY 24 visit.
- Please review the Provider Manual (pg. 64-65) for more information on requirements, resources, and more!





RFP

- Request for Proposal (RFP)
- Used to determine which agencies will be funded during Part A's next grant cycle
- Next RFP: **FY 25- 30**
- Agencies who previously were funded will need to rebid for their services, and any additional, during this cycle.
- This RFP is open to new agencies as well!

Draft Timeline

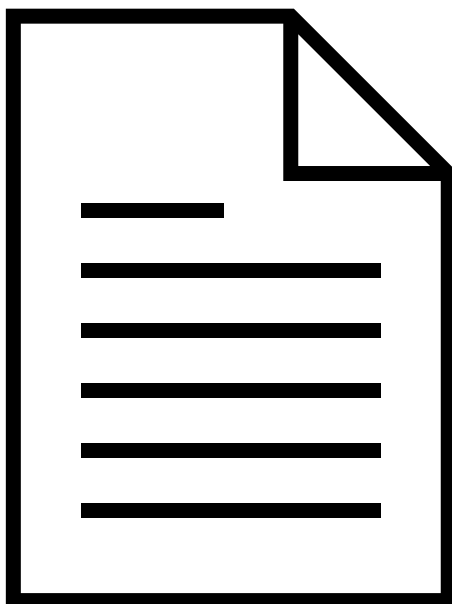




Bidders Conference

- Two sets of conferences running throughout the summer. Attendance is **REQUIRED** for one or both conference(s) that is applicable:
 1. Organizations who are rebidding services:
 - a) Would like to ask questions about the review and proposal process.
 - b) Confirm intent of rebidding.
 2. Organizations who will be bidding for NEW services:
 - a) Would like to ask specific questions on how best to write a proposal for those services.
 - b) Would like to review the separate additional prompts for new services.


Requirements




- Letter of Intent
 - Including narrative on how the agency plans on utilizing the funds
- Completed Application
 - HRSA and BPHC compliance measures
 - Proof of financial capacity within the agency
 - Demographic data submission
- Budget
 - For all services requesting
- Any required supplemental information (more to come!)
 - E.g: historical allocations/use narrative



Requirements

- Compliance Measures 
 - Be in full program/fiscal reporting compliance.
 - Funds may not be used to replace current State or local HIV-related funding.
 - Funds are intended to be administered as the payer of last resort.
 - Funds may not be used to purchase or improve land, or to purchase, construct, or make permanent improvements to any building except for minor remodeling.
 - Funds may not be used to make direct payments to recipients of Part A services.
 - 10% Administrative Cap

- We will be reviewing: 
 - **service models,**
 - **adherence to e2boston and CQM requirements, and**
 - **annual work plans during this RFP cycle.**

******We will be reviewing scoring criteria and service measures during bidders' conferences.



Services Open for Bid

Core Medical

- AIDS Drug Assistance
- Medical Case Management (MAI)
- Medical Nutrition Therapy
- Oral Health

Support Services

- Emergency Financial Assistance
- Housing
- Food Bank/Home Delivered Meals
- Non-Medical Case Management (MAI)
- Psychosocial Support Services (MAI)
- Substance Abuse Residential
- Health Education and Risk Reduction
- Medical Transportation
- Linguistics
- Other Professional Services- Legal



Biannual Survey

- Results from the AAM (Assessment of Administrative Mechanism) from the Planning Council, it was suggested that RWSD create the infrastructure to collect regular feedback on its performance throughout the year.
- We will have it open for one (1) month.
- It is optional and can be completed anonymously.
- We will run this survey twice (2x) a year.
- Shoutout to Glenda for creating it in FY 23.



Scan or Click the [link here](#)!



Clinical Quality Management

Melanie Lopez,
Tzuria Falkenberg,
and Alexandria
Whitted

05/01/2024

CLINICAL QUALITY MANAGEMENT (CQM) PROGRAM UPDATE

Tzuria Falkenberg,

Sr. Program Coordinator – Quality Improvement

Alexandria Whitted,

Sr. Program Coordinator - Performance Measurement



FY 2024 Ryan White Part A Provider Meeting

AGENDA

- ✓ Provider Manual Updates for CQM
- ✓ 2024 QI Culture Assessment Results
- ✓ Outcomes Reporting Updates
- ✓ CQM Announcements
- ✓ Resources

PROVIDER MANUAL UPDATES



UPDATED SUBSCRIPTIONS

- Removed Life QI and IHI Open School as subscriptions available for EMA due to infrequent use over the last couple of years.
- RWSD will be looking into other training opportunities for the EMA.



PERFORMANCE MEASUREMENT GUIDES

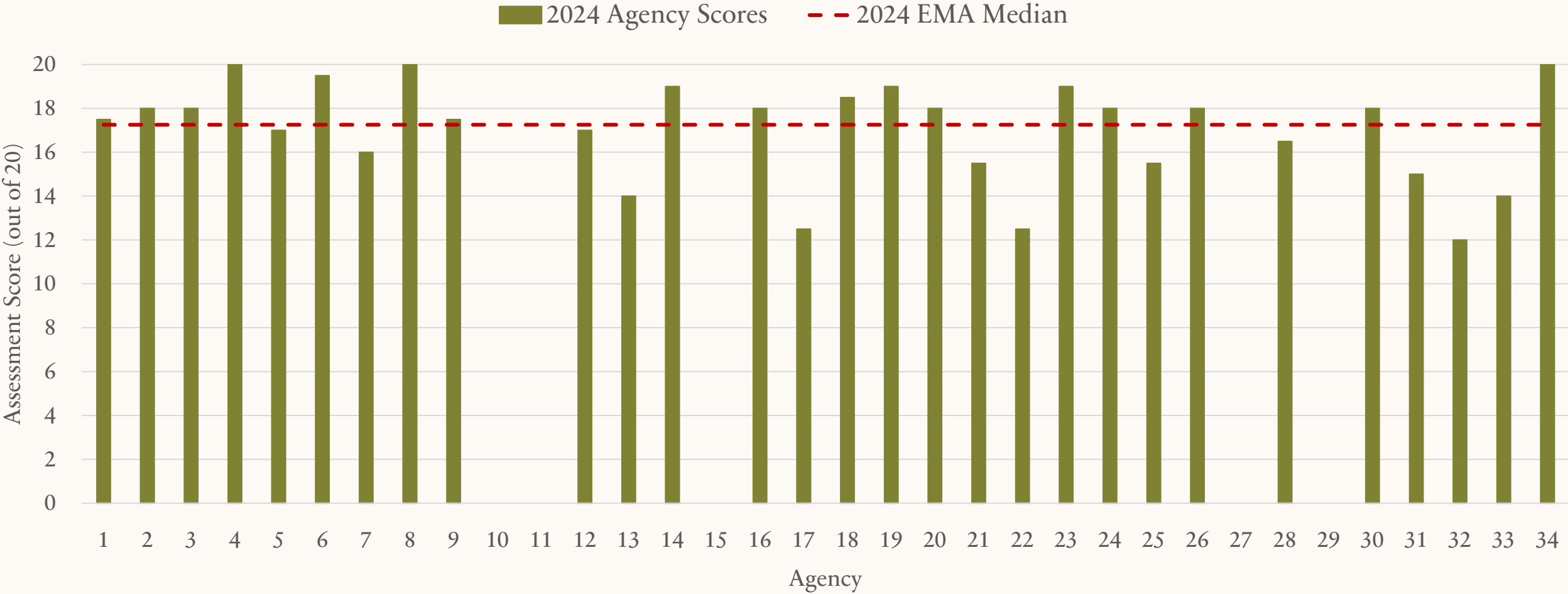
- Released Prescribed ART, Viral Suppression, and Annual Retention in Care performance measurement guides in FY 23 to help agency review and understand their data.
- Releasing Care Adherence today!



PROVIDER MANUAL

- Outline the requirements and encouragements during the fiscal year.
- See “CQM Subrecipient Expectations” section for more information!

2024 QI CULTURE ASSESSMENT RESULTS



CULTURE ASSESSMENT: REPORTED STRENGTHS ACROSS THE EMA (80%+)

Infrastructure:

- Agencies have **QI/QM plans**.
- **Senior leaders** actively participate in RW-program QI discussions
- Agencies have an **active QI team** or program staff actively participate in the organization QI team.

Performance Measurement:

- The improvement of HIV clinical outcomes is aligned with the **organizational strategic priorities/plan**.
- Agencies routinely collect **client satisfaction** surveys.
- Agencies monitor/track **process and outcome measures** that are stratified by key demographic **indicators** and aligned with the Boston EMA CQM Plan.
- Agencies **share performance measures with program staff**.

Improvement Capacity:

- At least 50% of RW-funded program staff have been **introduced to QI concepts and/or methodology**.
- At least one staff member at agencies is **proficient at analyzing data and identifying trends**.
- RW staff have **access to learning opportunities** (e.g. trainings, conferences) to develop QI-related knowledge, skills, and abilities.
- RW staff have **appropriate opportunities** to act to improve work processes (e.g. participate in QI projects, authority to implement improvements).

Improvement Success:

- Improvement activities and results are shared with external stakeholders

CULTURE ASSESSMENT: AREAS OF IMPROVEMENT ACROSS THE EMA (60% OR BELOW)

Infrastructure:

- None

Performance Measurement:

- None

Improvement Capacity:

- None

Improvement Success:

- Agencies **have not set reasonable goals to improve process measures** for the RW program in the last 12 months.
- Agencies who did set process improvement goals **have not met those process improvement goals.**
- Agencies **have not set reasonable goals to improve health outcomes** for the RW program in the last 12 months.
- Agencies who did set outcomes improvement goals **have not met those outcomes improvement goals.**

IMPROVING OUTCOMES DATA QUALITY



E2BOSTON DATA ENTRY

- Eliminate redundancy in the client record
- Eliminate underused or unused data elements in client record
- Separate clinical outcomes from Quality of Life information
- Increase data enterers' (you!) understanding of the data being entered



POLICIES & PROCEDURES

- Ensure that we are asking for data from the folks who have direct access to that information
- Make outcomes data shareable among Part A-funded agencies
- Clearly establish data importing policies and procedures
- Align data entry deadlines as much as possible



E2BOSTON REPORTS

- Eliminate redundancy in measures across reports
- Increase comparability of reports by establishing consistency of base populations

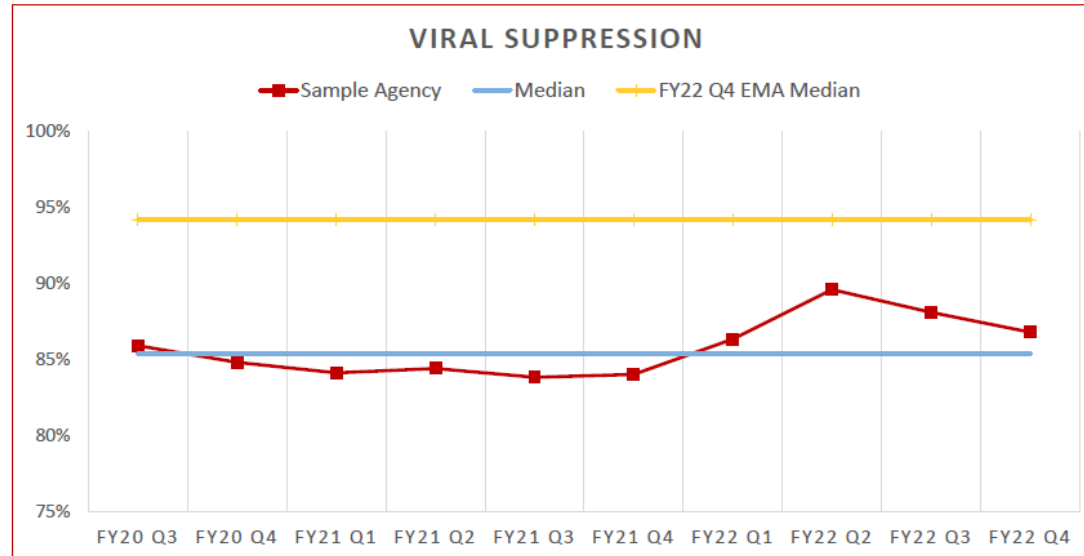
Sample Agency

FY22 Q4 Performance Measure Report | Medical Case Management

As of March 23, 2023



EMA Quality Goal 2: Increase the viral suppression rate among Part A clients to 92% by FY 2025.



86.8%

VIRALLY
SUPPRESSED MCM
CLIENTS THIS
QUARTER

94.2%

AVERAGE VIRAL
SUPPRESSION
AMONG MCM
CLIENTS THIS
QUARTER

This quarter, 86.8% of your agency's Medical Case Management clients were virally suppressed. This is higher than your agency's median of 85.4%, and is lower than the EMA median of 94.2%.

Viral suppression data was gathered through the e2Boston "Outcomes Measure Distribution" report and is defined as the percentage of Part A clients with outcomes submitted within the measurement period, who had a viral load of less than 200 copies/mL.

Each reporting period includes the most recent client data from the previous 12 months. FY22 Q4 data covers the period of March 1, 2022 - February 28, 2023.

For questions about this report, please contact BPHC's CQM team at cqm@bphc.org.

QUARTERLY DATA DISPLAYS

OTHER ANNOUNCEMENTS

- Coming soon: An organizational plan to reduce stigma
- Linkage to Care:
 - Improving your understanding of the Linkage to Care measure
 - Updating e2Boston!
- Rolling recruitment for CQM Committee members!
 - Meets for 90 minutes in May, June, August, October, December, February
 - Online
 - Providers, clients, and other Ryan White stakeholders are welcome
- No longer have IHI Open School for agencies or IHI Open School
- Data Importing Policy
- CQM Staff Changes:
 - CQM Sr. Program Manager position is vacant (3/29/24)
 - WELCOME, Tzuria Falkenberg! Sr. Program Coordinator, QI (3/11/24)
 - WELCOME, Alexandria Whitted! Sr. Program Coordinator, PM (4/22/24)

CONTACT INFORMATION & RESOURCES:



Contact the CQM Program at cqm@bphc.org.



Schedule [CQM Office Hours](#) with the CQM Team, Tzuria and/or Alexandria.



Consider joining the CQM Committee! Submit an interest form or full application [here](#).



e2Boston

Irina
Netshcheretnaya &
Donald Winship

05/01/2024



Data Presentation



Irina
Neshcheretnaya &
Donald Winship

05/01/2024



FY2023 Implemented Items



- ❖ Released a couple of e2Boston Trainings
 - ❖ The slides, PDFs, and recorded videos are available on the e2boston resource center.
- ❖ Provided a series of timeslots where agencies can meet with BPHC to discuss items:
 1. e2Boston Open Discussions to improve the data quality and understand items involving e2Boston training.
 2. Office Hours to clarify ongoing data issues.
- ❖ Implemented a few new filters in e2Boston reports.
- ❖ Transitioned out of the old “Time Machine” feature in the RSR report.

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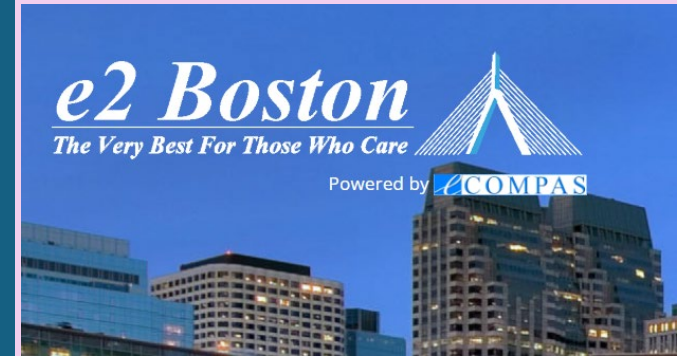
e2 Boston
The Very Best For Those Who Care

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FY2023 Implemented Items (cont.)

- ❖ Updated Utilization Summary and OMD reports with Drill-Down feature.
- ❖ Performed Document Tracker layout changes and implemented a new structure of the documentation stored in the system.
- ❖ Updated a new version of LKM to improve the unlocking process and PHI access.
- ❖ Removed Outcomes reporting requirements for the clients who received Client Communication, and/or Food Voucher subservices.



e2Boston Trainings

❖ **e2Boston Resource Center** contains both slides and videos for your convenience.

❖ **Requirements:**

1. New Case Managers **MUST** watch the trainings as part of their onboarding process.
2. **After they have completed the New Hire training curriculum,** then the case managers will complete the New Hire Certification form.
3. RWSD will certify that staff member in our database.



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e2 Boston
The Very Best For Those Who Care

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e2Boston Trainings



- ❖ The trainings are *highly recommended for everyone* who is working with e2Boston to refresh their knowledge with the trainings.
- ❖ We strongly suggest everyone who is working with the system join us during future online Office Hours.



Remind and Refresh

❖ Please email to **SUPPORT GROUP** if you:

- Have any technical issues with the system
- Need any assistance with e2Boston account


Our email address is **support @e2boston.net**

❖ Feel free to email the BPHC Data Manager and Program Coordinator if you:

- Have any questions about how to use the data
- Have questions about what to enter or when
- Have any other program-based issues
- Have new staff who need an account in e2Boston
 - Remember: A completed New User Form must be attached to this request!

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 **E2Boston New User Form**

Agency Name:

New User First Name:

New User Last Name:

New User Email Address:

New User Phone Number:

New User Title/Role:

New User access to Clients' Personal Information (Y/N):

New User Starting Date:

Reviewed By (Please put the supervisor's name):

Please, complete the information above and email it back to BPHC Data Manager (ineshcheretnaya@bphc.org) and your Agency's Program Coordinator/Contract Manager.

e2 Boston
The Very Best For Those Who Care

Powered by 

Remind and Refresh (cont.)

- ❖ Please check the e2Boston Resource Center for all documentation and education materials.
- ❖ Follow e2Boston announcements and BPHC newsletter emails for updated information.
- ❖ Join our online Office Hours to clarify your questions and be informed about all changes in data reporting.
- ❖ ***Email is the best way to reach us.

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NEW

FY2024 Plans and Timelines

❖ Summer 2024

- ❖ Improve the Client's Sidebar to indicate the client's sharing status.
- ❖ Implement a new Data Importing Policy to monitor data quality and submitting time.

❖ Fall 2024

- ❖ Standardize e2Boston reports base population to make all reports more consistent and easier to read.
- ❖ Implement the new Linkage to Care (LTC) section and retrofit the LTC section in the HAB report.

❖ Winter 2024 /2025

- ❖ Revise and update clients' gender identity options.
- ❖ Add the clients' pronouns information to the client's sidebar.
- ❖ Revise the Outcomes data collection including the reporting timeline and Outcomes clock. Allow sharing of outcomes forms including collaboration on outcomes form data entry.



Your Voice Matters!

e2Boston Proactive Courtesy Calls and Evaluation

- 1. Any problems or barriers with using the system?*
- 2. To what degree is the system saving you time?*
- 3. To what degree is the system reporting effective for you?*
- 4. How is technical assistance and support working for you?*
- 5. If not a “10”, what can we do to make it a “10”?*

*e2Boston Courtesy Calls are scheduled for **September 2024***

“The fact that someone calls me to make sure that all is well and to see if I have any ideas is just great”.

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e2Boston Courtesy Calls Qualitative Feedback



- *“Always a good experience using e2Boston”*

(Director of Program Support Services, AIDS Project Worcester, 4/05/2023)

- *“I love the e2 system, The reporting is good, and it gives me what I’m looking for most of the time.”*

(Director of Program Support Services, AIDS Project Worcester, 2/14/2022)

- *“The reports are very helpful, and the alert now is awesome”*

(Medical Case Manager, Making Opportunities Count, 4/05/2023)

- *“e2Boston is my favorite data system, I LOVE the reports!”*

(Director of HIV Services, Harbor Care, 4/05/2023)

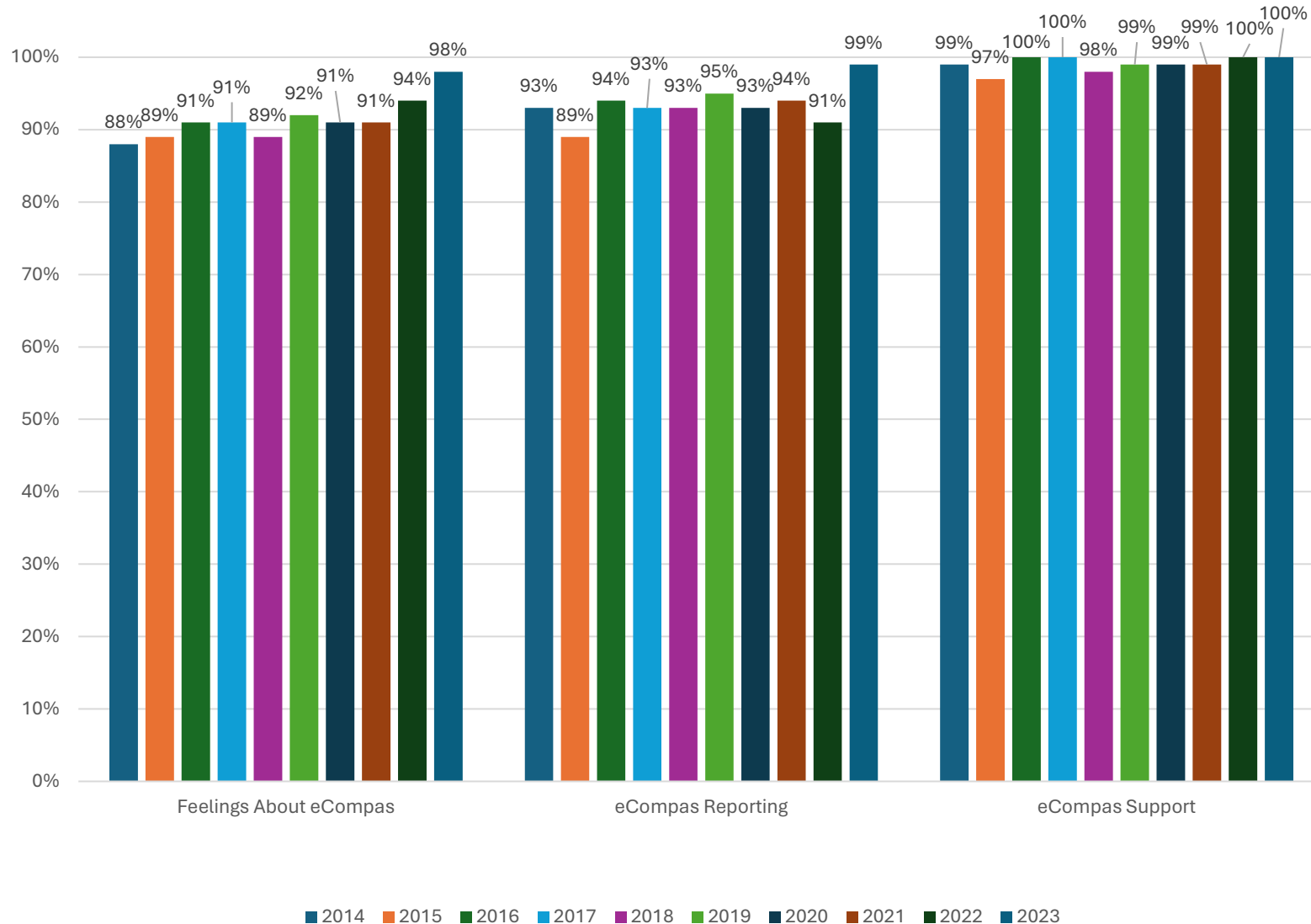
- *“Pretty good system, easy to navigate and everything is displayed clearly, you can still find something if you don’t know exactly what you’re looking for”*

(Transportation Coordinator, AIDS Project Worcester, 2/10/2022)



e2Boston Courtesy Calls Statistics

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- **2023**

- **320 Courtesy Calls**
- **Total Respondents: 57**
- **Completion Rate: 18%**

e2 Boston
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THANK YOU!

Stay tuned to get all the data and e2Boston news!

RDE and Irina will be staying during the Q&A block for any e2Boston related questions.

e2 Boston
The Very Best For Those Who Care

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5 Minute Break

***It's time for
my break***



Planning Council Presentation

Clare Killian,
Claudia Cavanaugh
& Vivian Dang

05/01/2024

INTRODUCTION TO THE...



Boston EMA Ryan White Planning Council



ABOUT US

Boston EMA
Ryan White
Planning Council



The Ryan White HIV/AIDS Program (RWHAP) provides a comprehensive system of care that includes primary medical care and essential support services for people living with HIV who are uninsured or underinsured.

The Planning Council is an independent group of volunteers, appointed by the Mayor of Boston, that decides how federal Ryan White Part A funds for HIV services should be spent in the Boston EMA.

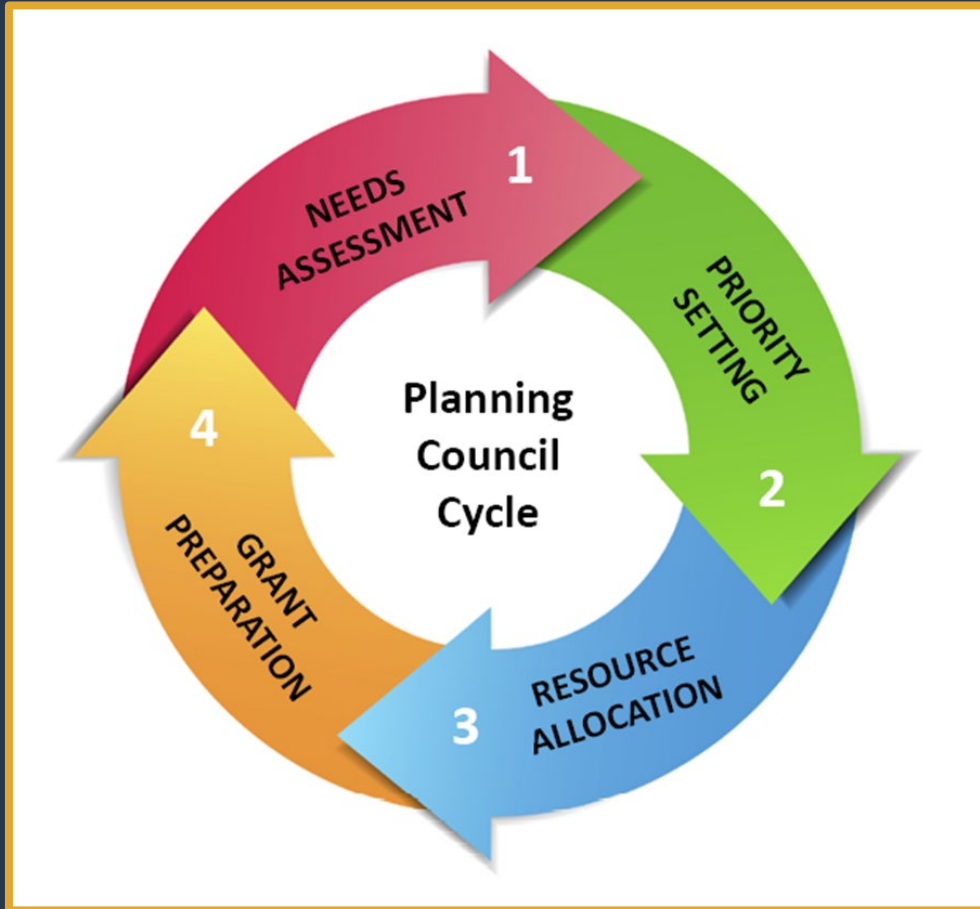


THE WORK OF THE

PLANNING COUNCIL CYCLE

PLANNING COUNCIL

- Planning Council operations: structure, policies, and procedures, and membership tasks
- Needs assessments
- Integrated/comprehensive planning
- Selection and Priority Setting of service categories
- Allocation of resources to funded service categories
- Guidance to BPHC on how best to meet priorities
- Coordination with other RWHAP Parts and other HIV-related services
- Assessment of the Administrative Mechanism (AAM)
- Development and annual of service standards



PLANNING COUNCIL STRUCTURE

- 2 year commitment
- Term begins in September
- PC meetings
 - 2nd Thursday of the month, 2 hour meetings, hybrid!
- Sub-committee meetings (NRAC, SPEC, MNC, Consumer)
 - Once a month, 2 hour meetings, hybrid!
 - Each sub-committee has a Chair and a Vice Chair
- PC Officers (Chair and Chair-Elect) and Committee Chairs
 - Attend Executive Committee meetings once a month



PLANNING COUNCIL COMMITTEES

Executive
Committee

NRAC (Needs,
Resources and
Allocations
Committee)

SPEC (Services,
Priorities and
Evaluations
Committee)

MNC
(Membership
and Nominations
Committee)

Consumer
Committee

Consumer Committee Spotlight: Someone You Know & Love Campaign

Campaign Goals:

- To confront and dismantle the stigma that still surrounds the HIV/AIDS epidemic
- To increase public awareness and HIV knowledge via public campaigns, speaking events, distribution of a short documentary film, and many more future events/activities!

**You already
know and
love someone
living with HIV**



This year, with the expansion of the campaign and the help of EHE funding we accomplished A LOT!

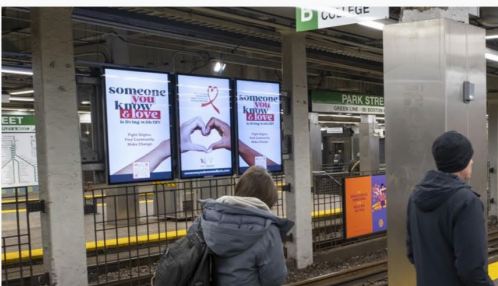
- Hosted an anti-stigma campaign intern
- Improved the website and Instagram page
- Held 2 university-based events
- Created and distributed campaign merch
- Supported an MBTA public awareness campaign
- Collected data toward a process evaluation of this campaign



www.someoneyouknowandlove.com



@someoneyouknowandlove



PLANNING COUNCIL SUPPORT TEAM (PCS)



CLARE KILLIAN
PROGRAM MANAGER



VIVIAN DANG
PROGRAM COORDINATOR II



CLAUDIA CAVANAUGH
PROGRAM COORDINATOR II

Connect with us via email PCS@bphc.org!

APPLY NOW!



WE'RE RECRUITING!

Who can apply?

- People Living with HIV
- Anyone interested in community organizing, public health, social services, medical fields, etcetera
- Residents of Massachusetts in Bristol, Essex, Middlesex, Norfolk, Plymouth, Suffolk, and Worcester counties OR
- New Hampshire residents in Hillsborough, Rockingham, and Strafford counties
- We encourage and welcome people from underrepresented communities and people of color to apply

Applications due June 14th, 2024, interviews to follow and nominations in late July!

*Paper applications are also available –
email us at PCS@bphc.org!*





THANK YOU!

To learn more about the work of the Boston EMA Ryan White Planning Council, or to apply to become a member, please contact Planning Council Support staff:

- **Email:** PCS@bphc.org
- **Phone Numbers:** 617-947-4299 or 857-880-3359





Ryan White Dental Program

Colette Bouquet &
Roelina Pena Cabral

05/01/2024

RYAN WHITE DENTAL PROGRAM (RWDP)

FY24 Provider Meeting

Presented by

Colette Bouquet, Program Manager

Roelina Pena Cabral, Senior Program Coordinator

**BOSTON
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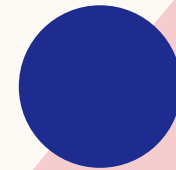
AGENDA

Program Overview

Application/ Enrollment Process

Renewal Process

Referral Process



WHAT IS RWDP?

WHAT DO WE DO?

2078

*Number of enrolled
clients in FY 23*

8604

*Number of service
activities in FY 23*

- RWDP aims to increase affordability and access to dental care for uninsured and underinsured PLWH
- Refer active clients to **contracted** dental providers
- We reimburse care for **general dental, periodontal, prosthodontic, endodontic services, and more**
- Provide education to consumers and dental providers

ENROLL ➡ **REFER** ➡ **REIMBURSE**

RWDP ONLINE RESOURCES

- ORAL HEALTH TIPS
- HIV DENTAL EDUCATION
- DOWNLOAD APPLICATION
- ELIGIBILITY REQUIREMENTS
- FAQ



Scan the QR code to access
the RWDP website

www.boston.gov/BPHC-RWDP

QUALITY IMPROVEMENT: APPLICATION

2024 UPDATED APPLICATIONS

- Addressed population need for improved language access
- Incorporated case manager input
 - Translated applications into Spanish, Haitian Creole, and Portuguese
- Revised consent form
- Applications are available online at boston.gov/BPHC-RWDP

ENROLLMENT PROCESS

- Clients, case managers, dental providers, and medical providers may enroll clients
- All required documents must be submitted
- Clients must reside in the Boston EMA or Massachusetts DPH-funded towns
- When utilizing e2boston Shared Eligibility,
 - You MUST still submit RWDP Consent form & RWDP Grievance form
 - Your agency's recertification date MUST match RWDP forms

*Clients or case managers must confirm RWDP's approval before seeking dental care

REQUIRED DOCUMENTS TO ENROLL

1. RWDP Intake forms
 - ☐ Signed Consent for Release of Information
 - ☐ Signed RWDP Grievance Policy Form
 2. HIV Verification/Proof of Diagnosis on Physician Letterhead
 3. Income verification within 6 months
 4. Health insurance verification
 5. Residency verification within 60 days
- We accept attestation letters for income, health insurance, and residency verification



RENEWAL PROCESS

- Clients must recertify every 12 months to maintain active coverage
- Renewal applications must include:
 - ✓ **RWDP intake forms**
 - ☐ Signed Consent for release of information
 - ☐ Signed RWDP Grievance Form
 - ✓ **Income verification within 6 months**
 - ✓ **Health insurance verification**
 - Residency verification within 60 days**
- Submit all required documents via fax, email, mail

Please note, HIV verification/Proof of Diagnosis is not required for existing clients



Incomplete applications can not be approved

❖ FY23: 110 incomplete applications were rejected



****Clients or case managers must confirm client's coverage status before seeking dental care**

DENTAL REFERRAL PROCESS

Once a client is enrolled, clients and CMs should reach out to RWDP for a dental referral to dental providers that are contracted with RWDP.

RWDP considers...

- **Previous dental history and chief client complaint**
- **MassHealth coverage or other third-party payer**
- **Convenient location for care**

Clients should note...

RWDP does not cover :

- **co-pays**
- **remaining balances from any other dental insurance**
- **No-show/cancellation fees or late fees.**
- ❖ **If enrolled in other dental plans, RWDP can only pay if other insurers declined to pay for services within the program's scope**

THANK YOU

Contact Us

617-534-2344 (MAIN)

BPHC – Ryan White Dental Program

1010 Massachusetts Ave

Boston, MA 02118

www.boston.gov/BPHC-RWDP



Community Resource Initiative (CRI) H/ADAP

HIV Drug Assistance Program (HDAP) New Electronic System:

Provide Enterprise[®]

HDAP's New System

- HDAP transitioned to a new electronic application and data management system **Provide Enterprise**® (“Provide”) on October 2nd, 2023
- Secure, online portals allow case managers and clients to:
 - Submit electronic applications
 - Submit supporting documents, premium bills, and updates
 - Check application status
 - Track client eligibility

Provide HDAP Portals Overview

- **Provider Portal** for case managers:
 - Requires licensed account assigned by HDAP
 - Submit HDAP applications on behalf of clients
 - Check on the status of submitted applications
 - Manage HDAP eligibility for case load
- **Client Portal** for clients
 - The website is mobile friendly, doesn't require account
 - Submit applications and supporting documents
 - Check application status
- **HOC Portal** for HOC Coordinators for incarcerated clients
 - Please notify us if you have a client who has been recently released

Welcome to the HDAP Client Portal

This portal is a site for clients of the Massachusetts HIV Drug Assistance Program (HDAP). The portal allows you to submit HDAP applications, check the status of an application, or upload additional documents for an application in progress. You can also provide updates to existing information, including such as changes to your health insurance coverage or submit premium bills, in-between recertifications. While this site allows you to submit an application without an account (portal login), if you create an account and login, all of your information from your previously approved application will be saved and you will only need to update information that has changed and submit new documents. Creating an account will also allow you to submit a Short Form (Self-attestation) through the portal when eligible. To create an account, please contact HDAP at 617-502-1700 or hdap@crihealth.org.

Login to Your Account



Submit an Application without a Portal Logon

Submit Any Other Documents

Check Application Status

I need help

Printable Forms

Provider Portal

Welcome aharrington@accesshealthma.org!

[Log Off](#)[Change Password](#)[Change Security Question/Answer](#)

Look up one client

Client HDAP ID ?

Client First Name ?

Client Last Name ?

Birth Date ?

Social Security Number ?

[Find This Client](#)

New Clients

[Long Form for New Clients](#) ?[RED Application for New Clients](#) ?

View ALL clients

[Open Full List of All your Agency's Clients](#)[I Need Help](#)[Printable Forms](#)[Medication Exclusions](#)[HDAP FAQs](#)

Save

Submit

Cancel

Applicant

Contact Info

Income

Insurance

CHII

Pharmacy

Medical

Attestation

Applicant Identification

Has your name changed?

Full First Name: *

Full Last Name: *

Preferred Name:



Pronoun:

The sex I was assigned at birth was: *

My current gender identity is: *

Country where I was born:

I can communicate in English: *

Languages:

- ☒ English
- ☐ Spanish
- ☐ Portuguese
- ☐ Creole-Haitian
- ☐ Creole-French
- ☐ Creole-Cape Verde
- ☐ French
- ☐ Other

Race - Check all that apply: *

- ☐ American Indian/Alaska Native
- ☐ Asian
- ☐ Black or African American
- ☐ Native Hawaiian/Other Pacific Islander
- ☒ White
- ☐ Prefer not to answer

Ethnicity: *

Provider Portal Dashboard

Client List

[Return to Home Page](#)

Case Manager's Institute	Case Manager Name	HDAP ID	Last Name	First Name	DOB	Enrollment Effective	Enrollment Term	Status of Last Application	Date of Last Application	Action
ABC Clinic	Ursillo, Alyssa	100014	Testing	Anne	01/01/2000	2023/04/19	2023/10/31	Submitted	2023/04/19	Open Application Check Status Submit Any Other Documents Email HDAP
ABC Clinic	Ursillo, Alyssa	100056	Girl	Birthday	07/01/1999	N/A	N/A	Completed	2023/06/16	Open Application Check Status Submit Any Other Documents Email HDAP
ABC Clinic	Ursillo, Alyssa	100167	Sky	Blue	07/12/1978	2023/08/10	2023/09/30	Submitted	2023/08/10	Open Application Check Status Submit Any Other Documents Email HDAP
ABC Clinic	Gikaria, Hellen	100153	Wagon	Chuck	08/01/1960	2023/08/08	2024/02/29	Completed	2023/08/08	Open Application Check Status Submit Any Other Documents Email HDAP
ABC Clinic	Casemanager1, Test	100180	Gribble	Dale	06/01/1960	2023/09/12	2024/03/31	Completed	2023/09/07	Open Application Check Status Submit Any Other Documents Email HDAP

Reminders: Required Application Documents

- The portal has required application questions in **bold***
- Documents are not required for submission to allow time to gather them, but ARE required for processing HDAP Long Form applications
- Use the “Submit Any Other Documents” button in portal to send documents separately from an application. These are automatically matched to the client/application in HDAP’s system.
- Multiple documents can be included in one attachment, but attach ONLY ONCE

Required Documents

- Client Consent & Certification
- Proof of residence
- Proof of income or no income attestation
- Insurance info/cards or 100% HDAP coverage request letter
- Signed clinician form as proof of HIV for new clients
- Labs (CD4 nadir if available, viral load annually)
 - Not required for eligibility but needed for reporting, will follow up with provider if labs are needed

See [HDAP Application Instructions – Long Form](#) for lists of acceptable documents: crihealth.org/printable-forms/

- Utility bill
- Paystub/earnings statement
- Lease
- Current driver's license/Massachusetts identification card
- Government assistance mailing (see exceptions below).

- At least two paystubs from your job, from within the past 3 months, showing gross income for those pay periods
- A copy of your unemployment statement, from within the past 3 months
- Award letters for the current year from SSI/SSDI, TAFDC/EAEDC, long-/short-term disability, and/or Worker's Compensation. (If you do not have copies of recent award letters, recently dated bank statements showing corresponding direct deposit amounts for monthly benefits received are acceptable.)
- Monthly pension statements for the current year

Portal Benefits

- We strongly encourage ALL providers submitting applications on behalf of HDAP clients to use the Provider Portal
 - Easier application submission with pre-populated client info, faster processing for HDAP team
- Encourage lower acuity clients to use Client Portal
- If you need an account or training, contact us at hdap@crihealth.org

Resources

- **Next Provider Portal Question & Answer: May 23, 2-3pm**
 - Register: <https://us06web.zoom.us/meeting/register/tZwkdOqsrlMjGN3dIENIzF-sijpOQ8t-xvdk>
- Training recordings, how to videos and quick reference guides: crihealth.org/hdap-portal-resources/
- Printable forms:
(e.g. Client Consent and Clinician Form) crihealth.org/printable-forms/
- Send questions to HDAP@crihealth.org or call 617-502-1700, Option 1



New Hampshire Care H/ADAP

Taylor Parent &
Team

05/01/2024

NH CARE Enrollments

May 1, 2024

Who is the NH CARE Program

The NH Division on Public Health Services receives federal funding* through Part B to provide life-sustaining medications and to ensure quality clinical and case management services to people who are:

- Living with HIV
- Residents of NH
- At or Below 500% of FPL

Eligible for Part A funding

- This funding is used for ADAP
- Boston EMA
 - Hillsborough
 - Rockingham
 - Strafford

How does an individual enroll?

- Individuals will be referred to reach out to an ASO in their area
- ASO will assign the individual to a (medical) case manager based off their own internal policies and procedures

Contact Information

- Main Office
- 29 Hazen Dr Concord NH 03301
- Phone: (603) 271-4502
- Fax: (603) 271-4934
- RWCareProgram@dhhs.nh.gov
- Hours: 8am – 4:30pm, M-F

ASOs

- AIDS Response Seacoast
 - Portsmouth, 603-433-5377
- HIV/HCV Resource Center
 - Lebanon, 603-448-8887
- Merrimack Valley Assistance Program
 - Manchester, 603-623-0710
 - Concord, 603-226-0607
 - Laconia, 603-724-4936
- Harbor Care
 - Nashua, 603-595-8464
 - Keene, 603-354-3241

Not working with ASO

- Limited exceptions are made to allow an individual to enroll in CARE without a case manager
 - This must be approved by the enrollment coordinator

What should a client bring to their intake with a NH Case Manager?

- Proof of HIV Diagnosis
- Proof of NH residency
 - Must contain their full name, address and dated within six months
- Proof of household income
- Any existing insurance information

Medicaid

- Anyone under 200% FPL is required to apply for NH Medicaid within 30 days of enrollment
- If a client is on MassHealth that will need to be cancelled

Thank you!



New England AIDS Education and Training Center

Kristin Moccia

05/01/2024



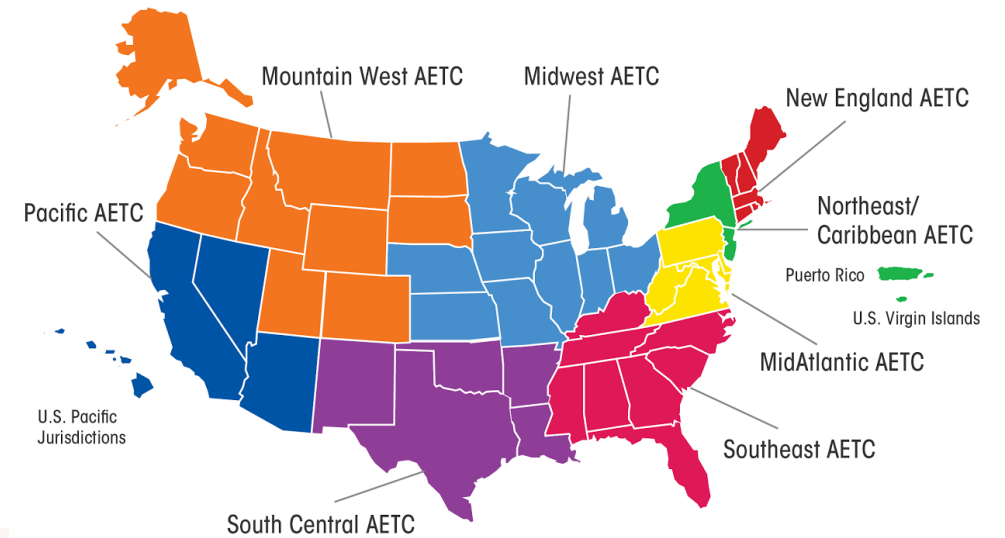
New England AIDS Education and Training Center (NEAETC) Massachusetts Local Partner

BPHC Ryan White Services Division Part A Providers Annual Meeting
Wednesday May 1, 2024
Kristin Moccia (she/her) EHE Program Manager, NEAETC



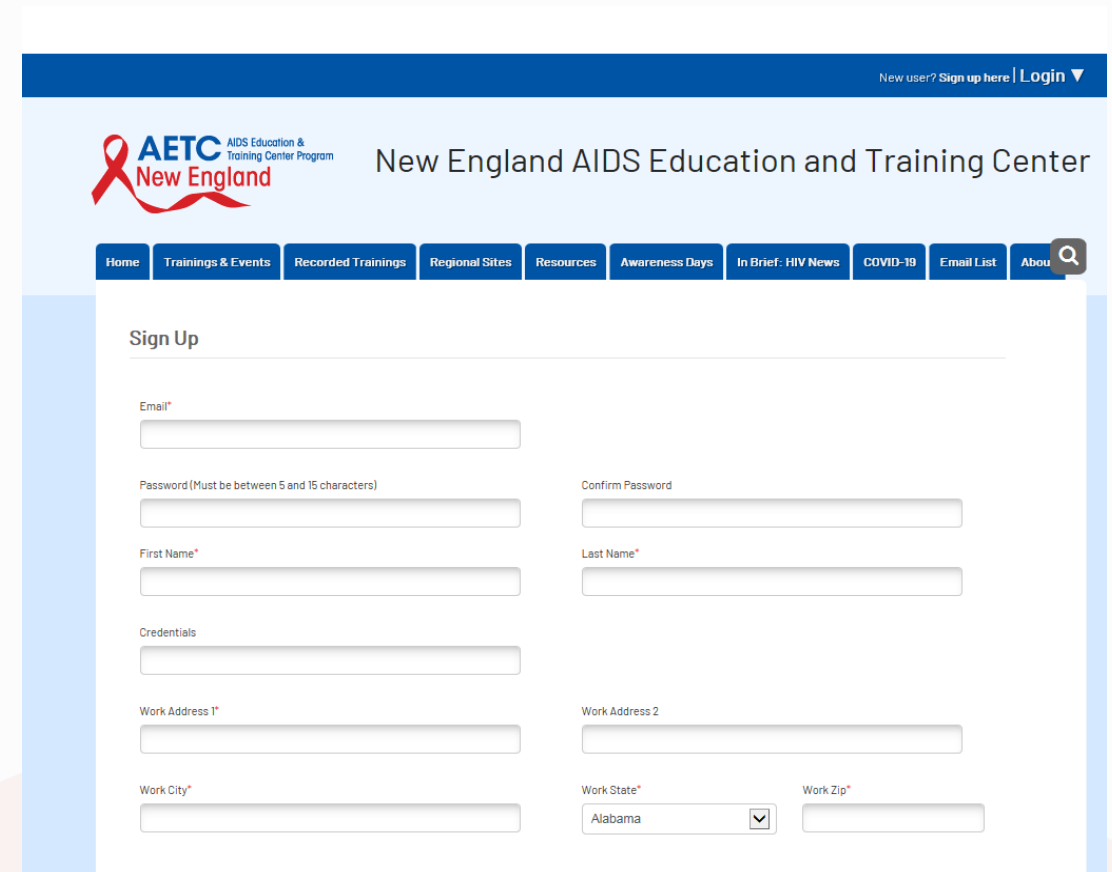
A national program of **leading HIV experts**, provides **locally based, tailored** education and technical assistance to healthcare teams and systems to integrate comprehensive care for those living with or affected by HIV.

The AETC Program **transforms** HIV care by building the capacity to provide accessible, high-quality treatment and services throughout the United States and its territories.



New England AIDS Education & Training Center (NEAETC)

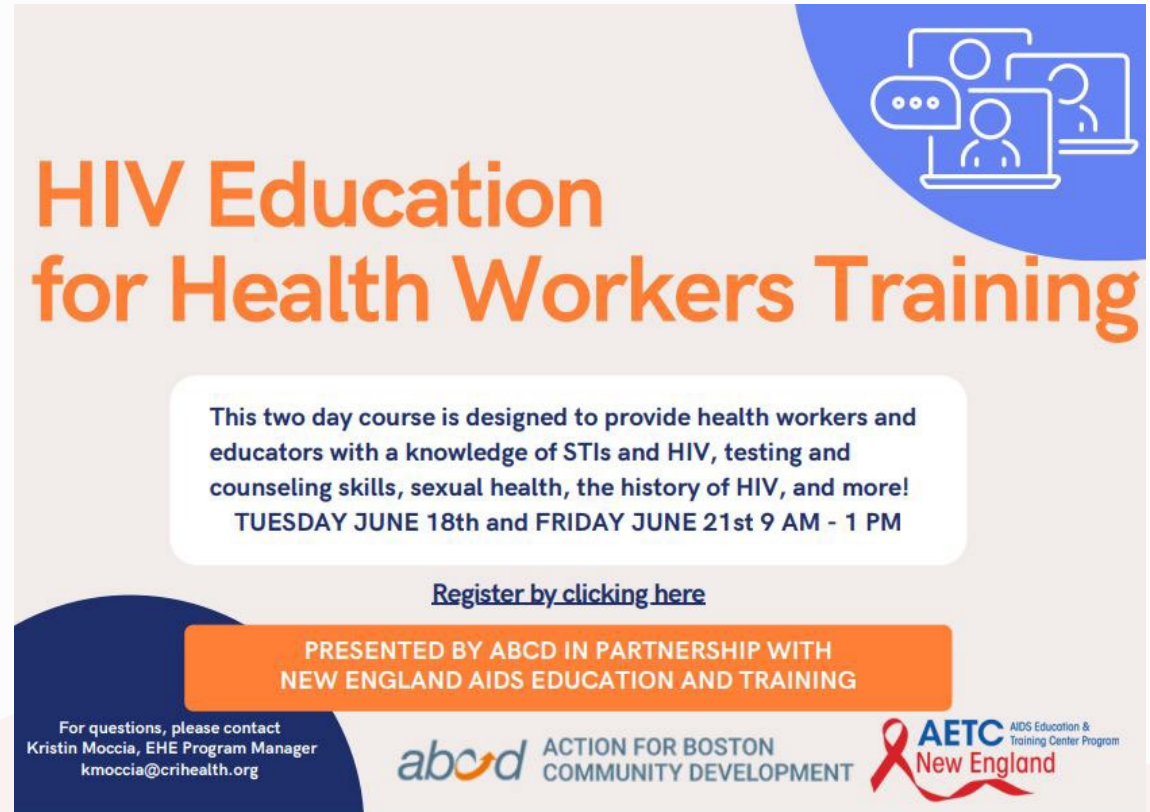
- Provides HIV/AIDS education, consultation, technical assistance, and resource materials to health care professionals throughout Connecticut, Maine, **Massachusetts**, **New Hampshire**, Rhode Island, and Vermont.
- Training modalities: Didactic and Interactive presentations, Community of Practice, Clinical preceptorships, Clinical consultation, Technical Assistance (TA), Coaching for practice transformation
- As an EHE funded organization in Suffolk County, we focus on workforce development through training and TA.



The screenshot displays the NEAETC website's 'Sign Up' page. At the top, a blue navigation bar contains the text 'New user? Sign up here | Login'. Below this, the AETC New England logo is on the left, and the text 'New England AIDS Education and Training Center' is on the right. A horizontal menu bar includes links for Home, Trainings & Events, Recorded Trainings, Regional Sites, Resources, Awareness Days, In Brief: HIV News, COVID-19, Email List, and About. The main content area is titled 'Sign Up' and contains a registration form with the following fields: Email*, Password (Must be between 5 and 15 characters), Confirm Password, First Name*, Last Name*, Credentials, Work Address 1*, Work Address 2, Work City*, Work State* (a dropdown menu currently showing 'Alabama'), and Work Zip*.

Trainings and Technical Assistance

- HIV Prevention in Adolescents and Young Adults
- Implementing Injectable HIV Treatment: Patient and Provider Perspectives
- Caring Conversations about Sexual Violence with BARCC
- Stimulant Use and HIV Prevention
- Sexual Orientation and Gender Identity Collection: Best Practices and Cultural Considerations for HIV Programs
- HIV & Aging



**HIV Education
for Health Workers Training**

This two day course is designed to provide health workers and educators with a knowledge of STIs and HIV, testing and counseling skills, sexual health, the history of HIV, and more!
TUESDAY JUNE 18th and FRIDAY JUNE 21st 9 AM - 1 PM

[Register by clicking here](#)

PRESENTED BY ABCD IN PARTNERSHIP WITH
NEW ENGLAND AIDS EDUCATION AND TRAINING

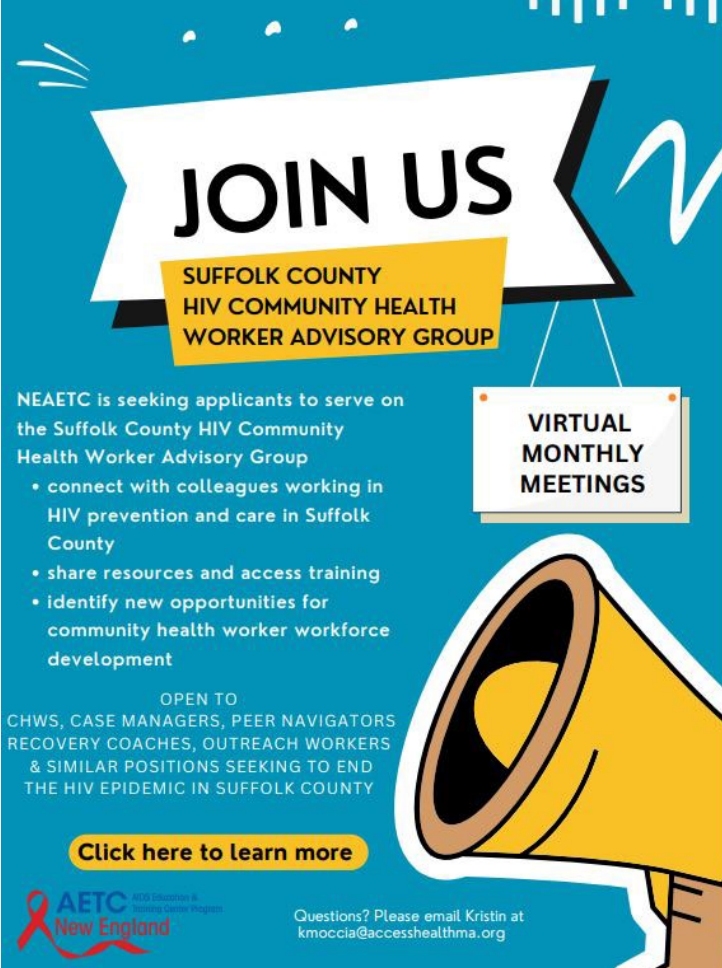
For questions, please contact
Kristin Moccia, EHE Program Manager
kmoccia@crihealth.org

abcd ACTION FOR BOSTON
COMMUNITY DEVELOPMENT

AETC AIDS Education & Training Center Program
New England



Ongoing Opportunities



JOIN US

**SUFFOLK COUNTY
HIV COMMUNITY HEALTH
WORKER ADVISORY GROUP**

NEAETC is seeking applicants to serve on the Suffolk County HIV Community Health Worker Advisory Group

- connect with colleagues working in HIV prevention and care in Suffolk County
- share resources and access training
- identify new opportunities for community health worker workforce development

OPEN TO
CHWS, CASE MANAGERS, PEER NAVIGATORS
RECOVERY COACHES, OUTREACH WORKERS
& SIMILAR POSITIONS SEEKING TO END
THE HIV EPIDEMIC IN SUFFOLK COUNTY

[Click here to learn more](#)

AETC AIDS Education & Training Center Program
New England

Questions? Please email Kristin at kmoccia@accesshealthma.org

**VIRTUAL
MONTHLY
MEETINGS**

PREP NAVIGATOR COMMUNITY OF PRACTICE



Join us for an in person open discussion on
Suffolk County colleagues working in HIV Prevention

Thursday May 23rd 11-1 PM

Harbor Health

1135 Morton Street, Mattapan, MA 02126



REGISTER HERE



**HIV Community of
Practice and Learning**

Quarterly virtual breakfast meeting focused on
Ending the HIV Epidemic in Suffolk County

Wednesday October 11TH

**8:30-9:30 AM: SEXUAL ORIENTATION AND GENDER IDENTITY
DATA COLLECTION: BEST PRACTICES +
CULTURAL CONSIDERATIONS**

Presented by Dr. Alex S. Keuroghlian, MD, MPH
Associate Chief, Public and Community Psychiatry, MGH
Director, Division of Education and Training,
The Fenway Institute

9:30-10:30 AM: Continue the conversation to share challenges, resources and
opportunities for collaboration amongst EHE funded community health centers

SUFFOLK COUNTY HEALTH CARE PROVIDERS AND STAFF WELCOME
CME/CEU PROVIDED

JOIN US BY REGISTERING [HERE](#)

AETC AIDS Education & Training Center Program
New England

Accreditation Statement: This activity has been planned and implemented in accordance with the accreditation requirements and policies of the Accreditation Council for Continuing Medical Education (ACCME) through the joint sponsorship of the University of Massachusetts Medical School and New England AIDS Education and Training Center. The University of Massachusetts Medical School is accredited by the ACCME to provide continuing medical education for physicians.

Credit Designation Statement: The University of Massachusetts Medical School designates this live activity for a maximum of **1 AMA PRA Category 1 Credit(s)**. Physicians should claim only credit commensurate with the extent of their participation in the activity. Nurses: Under the auspices of the New England AIDS Education & Training Center, this offering meets the requirements for a maximum of 1.2 contact hours, as specified by the Massachusetts Board of Registration in Nursing (244-CMR 5.04). Each nurse should claim only those hours of credit that he/she actually spent in the educational activity.

Policy on Faculty and Provider Disclosure: It is the policy of the University of Massachusetts Medical School to ensure fair balance, independence, objectivity and scientific rigor in all activities. All faculty participating in CME activities sponsored by the University of Massachusetts Medical School are required to present evidence-based data, identify and reference off-label product use and disclose all relevant financial relationships with those supporting the activity or others whose products or services are discussed. Faculty disclosure will be provided in the activity materials.

Funding: This program is supported by the Health Resources and Services Administration (HRSA) of the U.S. Department of Health and Human Services (HHS) under grant number U01A02234 (AIDS Education and Training Centers) awarded to the University of Massachusetts Medical School (UMMS). This information of content and conclusions any endorsements are inferred by HRSA, HHS or the U.S. Government.

AETC National Resources

- [National HIV Curriculum \(uw.edu\)](http://www.hiv.uw.edu) New Modules: HIV Symptom Evaluation Guides, Mini Lectures
- [*NEW National PrEP Curriculum](http://www.hiv.uw.edu)
- [Clinician Consultation | National Clinician Consultation Center \(ucsf.edu\)](http://www.ucsf.edu) Warm lines for clinical consultation, PEP, PrEP and more
- HIV Care Tools App [HIV Care Tools | AIDS Education and Training Centers National Coordinating Resource Center \(AETC NCRC\) \(aidsetc.org\)](http://aidsetc.org)



www.hiv.uw.edu

Free, up-to-date website for healthcare professionals to learn about HIV diagnosis, treatment, and prevention

FREE CME, CNE, APN, PHARMACOLOGY CE, CE, AND CERTIFICATES OF COMPLETION

VISIT THE SITE TO:

- Access **37 Self-Study lessons**, earn free CE and CoC, and track progress
- Search for current information or scan through the **Quick Reference** section
- Answer 400+ board-review style questions in the **Question Bank** and earn free CE
- Use 18 clinical screening **Tools & Calculators** to help with clinical decisions
- Explore **Antiretroviral Medications**, review clinical trials, and view slide decks
- Examine **5 HIV Symptom Evaluation Guides** about common symptoms
- Watch clinically relevant, concise **Mini-Lectures** to supplement learning

The National HIV Curriculum is an AIDS Education and Training Center (AETC) Program supported by the Health Resources and Services Administration (HRSA) of the U.S. Department of Health and Human Services as part of an award totaling \$1,332,044 with 0% financed with non-governmental sources.

Hepatitis C Training & Technical Assistance

- Collaboration between BIDLs/DPH and NEAETC, primary care providers can receive education and training on hepatitis C testing and treatment at no cost.
- Utilize the HCV online curriculum from UW IDEA program (self-study, CE credits)

Resources available:

- Clinical mentoring, consultation and case discussion with HCV Champion
- Access to a statewide quarterly clinical Community of Practice,
- Training and technical assistance for individual clinics/facilities



Thank you!

Kristin Moccia

EHE Program Manager

New England AIDS Education and Training
Center

kmoccia@crihealth.org





Case Management Training Program



EDUCATION AND COMMUNITY ENGAGEMENT

Case Management Training Program

May 1st, 2024





Introduction/Updates



New Hire Process



HIV Needs Assessment



Upcoming Training

Agenda



Programmatic Changes

The Case Management Training Program Expands!

- We have a new STI Prevention Program Manager who will be part of the Case Management Training Program:
- Welcome: **STI Prevention Program Manager: Jacqueline Huynh**

Available Positions

- Senior Program Manager
- Program Coordinator III



Case Management Training Program (CMTP)

The Case Management Training Program (CMTP) is funded to provide training, technical assistance, and capacity-building assistance services to Boston EMA subrecipients. Subrecipients funded for Medical Case Management and/or Non-Medical Case management services will be mandated to participate in a series of core competency curricula.

Together We...

- ➔ Collaborate to build and share resources.
- ➔ Educate case managers, clients, and communities.
- ➔ Advocate for the health and well-being of people living with HIV/AIDS.

Our Mission

The Case Management Training Program strives to empower case managers to work as a community to provide consistent, comprehensive care to people living with HIV. We do this by partnering with local organizations to provide trainings and resources for case managers so they can ensure people living with HIV can reach and maintain viral suppression by accessing the full continuum of HIV services.

Program Insight

BOSTON
PUBLIC
HEALTH
COMMISSION



WHO WE SERVE

Agencies & Counties

Medical Case Management

Beth Israel Deaconess Hospital – Plymouth
Boston Health Care for the Homeless Program
Cambridge Health Alliance
Codman Square Health Center
Dimock Community Health Center
Edward M. Kennedy Health Center
Fenway Community Health Center
Greater Lawrence Family Health Center
Harbor Health Services, Inc.
Harbor Care (NH)
Lynn Community Health Center
Massachusetts General Hospital – Boston
Massachusetts General Hospital – Chelsea

Medical Case Management - MAI

East Boston Neighborhood Health Center
Upham's Corner Health Center
Whittier Street Health Center

Non-Medical Case Management

AIDS Project Worcester Casa Esperanza
Catholic Charities Bureau of the Archdiocese of Boston
Merrimack Valley Assistance Program (NH)
Making Opportunities Count, Inc.
Multicultural AIDS Coalition
Victory Programs, Inc.

Non-Medical Case Management - MAI

Massachusetts Alliance of Portuguese Speakers



Counties

Essex
Suffolk
Norfolk
Worcester
Bristol
Plymouth
Hillsborough (NH)

Training Agencies



New Hire Process



For the [Case Management Training Program ListServ](#), it's imperative that all new hires complete the provided link. This link directs you to a Mailchimp form, which assists us in keeping an updated record of all case management agencies funded for this purpose. Your completion of this form is essential as it ensures an accurate count of new hires and identifies those requiring training.



Additionally, it's crucial for all new hires to discuss registration with their contract manager and then proceed to complete the Case Management Training ListServ and New Hire Form.



To ensure comprehensive data collection, we also request new hire staff to complete the [FY24 New Hire Case Management Form](#)

This form enables us to gather additional information on new hire case management experience, facilitating the alignment of training modules to best support our new case management staff.



New Hire Training



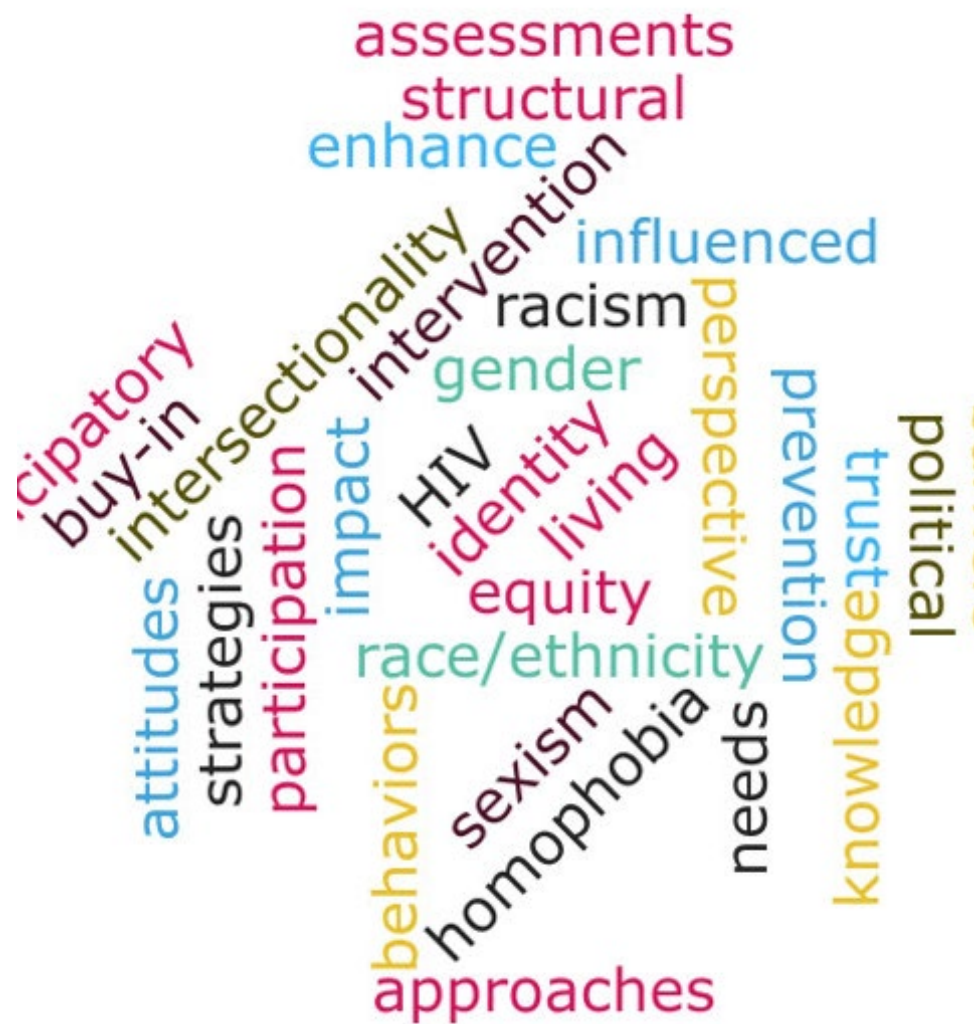
In alignment with the findings of the HIV Needs Assessment, all FY24 training sessions will continue to adopt a hybrid approach.

CMTF will email all new hire participants once they've been verified by the RWSD.

-Stay tuned for upcoming training schedule.

- All new hires will receive an email with a link to register for the new hire training.
- All new employees who register for the in-person training will receive an online curriculum to complete in advance of the in-person training.
 - Online Program: HIV Essentials
 - In-person Curriculum: Client-Focused





HIV Needs Assessment

- The objective of this form is to assess the training needs of all case management staff funded for HIV case management. Your input will assist us in enhancing our support and resources throughout the year.

[HIV Needs Assessment](#)

Deadline to complete the HIV Needs Assessment
May 3rd, 2024



HIV Needs Assessment Results

Training Request/Information Sessions

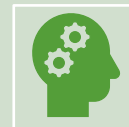
- Counseling and communication skills
- Case management practices
- Cultural competency and sensitivity
- Addressing stigma and discrimination
- HIV treatment and medication adherence



Awareness of de-escalation, harm reduction techniques, and general knowledge of SUD.



Housing Referral



Motivational Interviewing



Case Management Advisory Committee

Currently, the Infectious Disease Bureau and the Case Management Program will dedicate this fiscal year to aligning the strategic objectives of the advisory committee.

- ✓ This focus will be on refining the policies and procedures outlined in the advisory committee charter, as well as developing new policies and procedures for the next fiscal year of the case management advisory committee
- ✓ If you are interested in becoming part of the advisory committee for the next fiscal year, please complete this form and we will be in contact once we start the recruitment process
- ✓ <https://forms.office.com/g/JD1Ew3D6by?origin=lprLink>





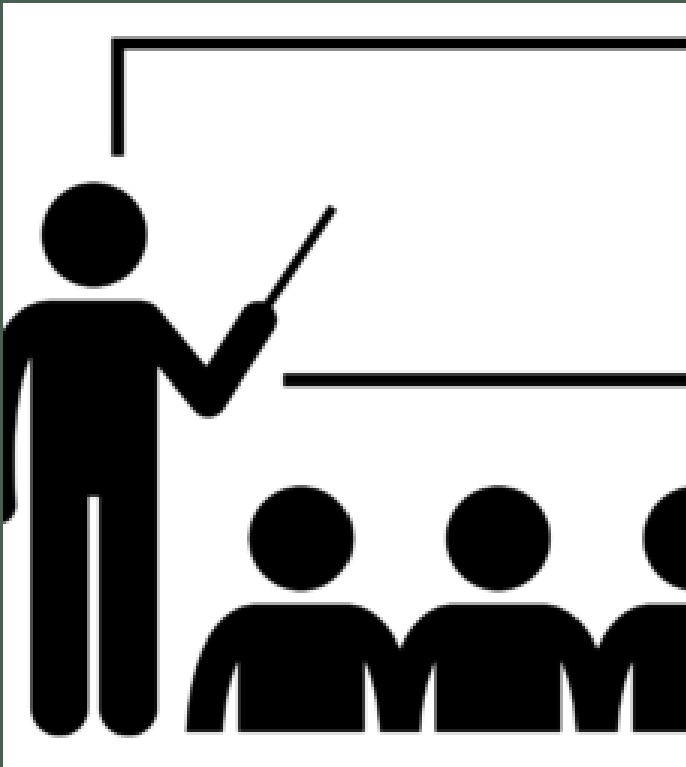
Training Newsletter

We ask Boston EMA agencies and partner agencies to send us any information relevant to the HIV community that's worth a quick share!

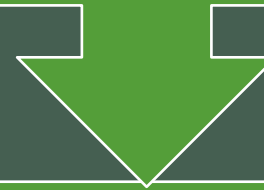
The newsletter is a tool for professional development and capacity building for healthcare professionals, educators, and other stakeholders involved in HIV/AIDS work. Individuals can stay informed and equipped to provide high-quality care and support by receiving updates on the latest research, developments, and training opportunities in the field.

The newsletter facilitates communication and engagement within the HIV/AIDS community by providing a platform for sharing news, success stories, and relevant updates. Readers are encouraged to engage in dialogue, networking, and collaboration, leading to a feeling of solidarity and shared purpose in the battle against HIV/AIDS.

Training Request Form



Specialized training will be designed to meet the specific training needs requested by the Boston EMA. Agencies can submit specialized training requests through the Case Management Training Program Training Request Form



The CMTF Training Request Form can be completed by following this link

[CMTF Training Request Form](#)





CONTACT US

General Inbox:
ldbtraining@bphc.org

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JRI Psychosocial Support Services Training



Rachel Weidenfeld

05/01/2024



Justice Resource Institute

Psychosocial Support Training Update

Training Program 101


JRI offers trainings to Psychosocial Support Staff, who may have different titles but are funded as PSS staff, and are often in peer roles. In the past few years we have opened these trainings up to HERR staff as well!

Calendar/topics set between March-May

Trainings are typically offered monthly between June-February

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Example sessions from the past year

- Boundaries and Professionalism
 - Cultural Responsiveness
 - Goal Setting
 - LGBTQ+ Health
 - Self-Care and Wellness
 - Documentation
 - Engaging Hard to Reach Clients
 - Support Group Facilitation
- 
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Needs Assessment Survey

Look out for a Microsoft Forms survey link in your email!

- Feedback on previous trainings
- Prioritizing training sessions for this year
- New potential training needs
- We'd love feedback from both supervisors and PSS staff, so please forward to relevant team members!
- If you don't get our emails, chat me your email now!

Training Scheduling

- Training calendar updates will be released over the next few months along with registration info
- We will continue to offer some training sessions in-person and some on Zoom
- We are also available for TA and coaching around PSS-related topics!



THANK YOU!

Dan Aguilar

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Rachel Weidenfeld

Rweidenfeld@jri.org





Question Block & Close

Thank you for attending the FY 24
Provider Meeting! Please stay tuned
for more materials.

05/01/2024