Care Plan Quality Improvement

Medical Case Management within the HIV Program

At WCHC, Medical Case Management (MCM) plays an essential role in supporting effective engagement in care. All people with HIV/AIDS accessing any Ryan White-funded program must receive medical case management services, which begins with an initial assessment of need and the development of a comprehensive individualized care plan. The Care Plan brings together the needs of the patient with referrals to our social work case manager, our nutritionist, or other members of the care team, depending on the need and the situation. This care plan needs to be updated annually. At RRHC, Jona Jenkins, RN, is our Medical Case Manager.

RRHC Medical Case Management Quality Improvement Project:

We wanted to increase the number of RRHC HIV+ patients who have a current care plan updated in the last 12 months.

Baseline Data Jan 1, 2017: 18% of RRHC HIV+ patients had a current care plan.

March 31, 2017: 42% of RRHC HIV+ patients have a current care plan.

Result: 24% increase in HIV + patients with current care plans at RRHC in three months. WOW! How did Jona do that??

• Reviewed the schedule to combine a case management visit with a provider visit.
• Utilized her voice mail and didn’t answer every incoming call, which allowed her time to focus on care plan updates.
• Used set aside project time to focus only on updating care plans.
• Used a list created from the HIV quality dashboard to identify patients who were due for care plan updates.

Introducing Jona Jenkins, R.N.

In October of 2016, Jona became the new HIV Registered Nurse Case Manager. She has been with Russian River Health Center since December of 2015.

We are lucky to have her on the HIV team.

What made you want to work in the medical field?

When I was a young art major in college I decided that I wanted to be a doctor and switched my major to neuroscience. For a year and a half I studied and studied until
Sonoma County Partner Notification Services

Partner Notification Services is a public health service that assists people with HIV and other sexually-transmitted infections in notifying sex and/or needle sharing partners of a possible exposure, in order to facilitate testing and early referral to treatment.

Partner Services is voluntary and confidential.

Locatable partners are confidentially contacted by phone, email or in person to inform them that they may have been exposed to HIV and/or another STD.

No names or dates of exposure are ever revealed to maintain the anonymity and privacy of the original patient.

Why use Partner Notification Services?

- 20% of HIV+ individuals are unaware of their status, yet account for more than 50% of transmission.
- 18% of partners found through partner services in 10 states were identified as new HIV cases.
- 3rd party notifications result in higher positivity than conventional testing alone.

What types of notification are there?

3rd Party— Client wants to remain anonymous and wants Health Department assistance in notifying partners.

Dual notification— Client wants to disclose him/herself, but wants provider present for support and/or to answer questions. Client must disclose his/her own status.

Self — Client wants to disclose him/herself with support preparing for the conversation.

What kind of information is asked about the person you want to be contacted?

Name or nickname, phone or email if no phone and/or address. General description of the person including age and date of last time they had sex.

Why would you want to use Partner Notification Services?

- Helps break the chain of HIV transmission.
- Gives present and past partners an opportunity you might not have had.
- Your partners can get medical care sooner.
- Relieves stress and guilt.
- Makes the community a healthier place.
- Informing your partners will help them take care of themselves and will prevent many other people from getting HIV.

Did you know that a pill a day can protect your partner(s) from getting HIV?

For more information, talk to your doctor today or come to the PrEP Pool Party at R3 on July 29th!
Be PrEPared!

KIWI, AVOCADO & COLLARD (or KALE) SALAD

10 collard leaves (or one bunch kale)
1-2 T grated onion
1/4 c lime juice
1/2 t salt
1 tsp or so of olive oil
Small amount of apple cider vinegar (or other fruit vinegar)
2 avocados
2 kiwis (not squishy)

De-vein greens, (cut out the center, tough stem) and then roll and slice the leaves into 1/4” strips— or chop the leaves into small pieces after de-veining.

Grate the onion onto the greens.

Sprinkle the greens with the lime juice and salt. Massage greens for 2-3 minutes to soften.

Add olive oil, and/or fruit vinegar to taste. You can let this marinate for a bit if you want, or eat it right away.

When ready to serve, cube the avocados. Quarter kiwis lengthwise, then slice crosswise.

Add fruits to salad, and mix gently.

Nutrition News with Nina Redman
Introducing Christopher Hightower

Christopher became an Access Coordinator and AIDS Drug Assistant Enrollment Worker for WCHC in Oct 2014. He is an important asset to our HIV team here at WCHC!

What made you want to work in the medical field?

I trained people in hospitals in Georgia and South Carolina for seven years on the release of medical records and laws associated with each state. While I did that I served on the Board of Directors for AID Gwinnett, Inc., a multi-faceted program geared to help those suffering with AIDS in Georgia, for 11 years. I served as Vice-Chair for the last seven years I was on the Board.

I took a job with AID Gwinnett and had to resign from the board. I was a patient advocate with them and handled all the ADAP applications for 865 clients. I also did patient assistance applications for all medications that were not on the ADAP Formulary. That job ended in 2014 due to funding cuts.

I moved to California in 2014 to be with my partner, as we had a long distance relationship for 11 years. I took a job with WCHC as an Access Coordinator.

What do you hope to offer clients?

I hope to offer patients the compassion they need to get health insurance, no matter what income they have and to treat everyone the same, no matter what needs they may have. I want to enroll them in ADAP, if needed, so they can get the medications that they need.

How does your role support the HIV team?

I hope to be able to support the HIV team with my knowledge from being a Board Member for 11 years at an HIV organization and my 7 years working for an HIV organization. We were one of the few organizations that received funding from all parts of the Ryan White Program.

What inspires you?

People inspire me to help them. I really enjoy helping people get insurance and see them smile for the first time after they are accepted. I am very inspired to help all women and men get access to HIV medications.

A little about yourself: your pets? Your partner? What do you like to do when you’re not working?

My partner Scott is an architect with his own business in Santa Rosa. We have two dogs, Bogart and Samantha. They are both Dachshunds, one short haired and one wire haired. In my spare time I like to make handmade cards and we like to travel.
Consumer Advisory Boards for Ryan White Programs: A way to be involved on a program level.

The main purpose of a CAB (Consumer Advisory Board) is to provide a consumer perspective and represent your community in making sure Ryan White funded activities are carried out in a way that best meets consumers’ needs. The CAB is one more way for care team members, consumers, and the community to communicate with each other.

The CAB members can serve as a link between the care teams and the community, giving the community information about services and bringing community concerns and ideas back to the care team. We also work on quality projects and program development, all with an HIV program emphasis. We have two boards, one for the Russian River Health Center and one for Sebastopol Community Health Center. The boards meet quarterly and your participation would require a commitment from you to attend those meetings on a regular basis.

Please feel free to contact Jenny Zapp, HIV Program Manager at 707-869-2849 ext 2235 if you would like to learn more about the HIV Consumer Advisory Board or if you are interested in joining one of the CABs.

Would you like to receive updates about extra HIV-related groups, events, and services?

WCHC will be sending out periodic emails with details about support groups, community events and clinic updates.

Sign up today at: www.wchealth.org

Introducing Jona Jenkins, R.N. (CONTINUED FROM COVER)

I came to the conclusion that I never wanted to take another chemistry, math, or science class again.

I went back to art, but during that time I had started working in a hospital cleaning hospital rooms and the OR after surgeries. I had also received my nursing assistant certificate and started working as a home health and hospice aide which I loved doing for the next 3+ years.

My patients could not believe I was studying art instead of nursing and told me that I would be a great nurse. I guess they eventually got through to me because I switched my major again and because of my pre-med studies I had most of the nursing prerequisites already completed.

What do you hope to offer clients?

Humanity. Compassion. Empathy. Life changing interactions...hopefully.

How does your role support the HIV team?

I support the HIV team by advocating for patients and connecting them to other members of the team. I value my team and am interested in who they are and what matters to them.

What inspires you?


A little about yourself: your pets? Your partner? What do you like to do when you’re not working?

Two cats: Zander and Xerces. A pink betta fish: Filipe. A freshwater snail: Zora. Marisa is my fiancé and we are planning a wedding next summer. She is a PR professional who works from home as well as an avid reader and likes to write. We both like to cook. I like to draw and paint when I can find the time.