AIDS Resource Center of WI
Community Outreach Case Manager
Full-time
Milwaukee

Job Description:
The Retention Case Manager utilizes best practices and new strategies to locate HIV positive individuals who are out of care and to connect them to care. This Case Manager provides intensive support and services to those who require rigorous assistance to improve their ability to access and remain in care. This Case Manager will coordinate with the ARCW Quality Department, the State AIDS/HIV Program, HIV testing sites and the ARCW Medical Center to identify potential clients through Data to Care metrics. The Case Manager will utilize agencies and resources to locate these clients and initiate access to care through barrier identification, HIV disease and treatment education, and care coordination. This position is funded through Ryan White Part B Grant through the State of Wisconsin.

The AIDS Resource Center of Wisconsin, Inc. (ARCW) is Wisconsin’s largest provider of HIV prevention, care and treatment services with a budget in excess of $69 M. The unique, nationally recognized ARCW HIV Medical Home model of care assures that everyone with HIV has access to medical, pharmacy, dental, mental health and social services and provides the best opportunity for patients to achieve high quality health outcomes. ARCW also provides aggressive HIV prevention services to gay men, injection drug users and others at the highest risk for HIV infection. Retention Case Managers are a part of the Social Services and Medical Center teams and report to a Case Manager Supervisor who also provides Retention Case Management.

Responsibilities:
1. Improve outcomes on the Wisconsin HIV Care Continuum.
   a. Collaborating with the State AIDS Program and ARCW management, assist in the development of a new approach to case management that includes more intensive case finding of those living with HIV who are not connected to any care providers. Assist with development of strategies that successfully connect these individuals to care and keep them in care.
   b. Utilize Data to Care methodology to identify HIV positive individuals out of care.
   c. Using best practices from Linkage to Care, Medical Case Management and HIV Partner Services, perform case finding in the community to locate out of care individuals. This will include utilizing investigative strategies like social media searches as well as home and other community visits to attempt to locate and connect with individuals out of care.
   d. Once located, provide education, barrier removal, resource identification and care coordination to link the individuals to ongoing case management, medical care and other needed care.

2. Provide highly focused, intensive, support and care coordination to small caseload of individuals at high risk for falling out of care or who have lapsed from care.
a. Complete intake, acuity index and comprehensive assessment to identify barriers to care and other relevant needs. With the client, construct a service plan that contains goals about connections to care, health and stability achieved through effective and sustainable solutions. Maintain compliance with State HIV Medical Case Management Standards.

b. Build a care team around each client of ARCW and community physicians, nurse practitioners, therapists, dentists, pharmacists, and community case managers to identify patient health needs, facilitate communication and ensure accessible, confidential and high quality services to mutual clients/patients.

c. Provide HIV disease prevention, chronic disease education, treatment education and adherence counseling.

d. Facilitate access to health insurance and benefits, including enrollment in ARCW’s Medical Home if applicable.

e. Provide appropriate referrals for services needed to stabilize client in care and follow-up to ensure service delivery.

f. Accompany clients to health appointments; this may initially include transportation to and from the appointment while other resources for this need are identified.

g. Monitor and improve client’s progress to self-advocacy and full participation in his/her care decisions.

h. Provide a highly intensive level of care coordination and case management with client-centered interventions. The Retention Case Manager spends significant time in the community, at client homes and in other locations that best meets client need. This intensive service is to aid the client in attaining health, stability and readiness for standard medical case management services at a point in the future deemed appropriate.

3. Contribute as an active member of the Social Services Department by participating in staff meetings, in-service trainings and workshops, department or agency planning activities, assisting with special projects, and providing support, peer mentoring and training to co-workers as needed.

4. Establish a working relationship with appropriate community resources in the area, including those providing HIV Partner Services, HIV testing, and health, mental health and social services to underserved and target populations.

5. Contribute as an active member of the Retention team by developing and implementing best practices for case finding and care linking activities. Provide feedback during planning sessions about best practice standards, program improvement and unmet client/patient needs.

6. Maintain appropriate patient files and timely documentation of services utilizing electronic case management and medical software such as Provide Enterprise and EPIC.
7. Obtain and maintain knowledge of HIV/AIDS, risk reduction, AODA and mental health issues, case management and other related topics through self-study and participation in trainings, workshops and in-services in consultation with supervisor.

**Qualifications:**
- Hold a Masters or Bachelor level degree from an accredited college or university in Social Work, Psychology, Human Services, or related discipline.
- Possess a valid Wisconsin Driver’s License, have an Insurable Driving Record, and own or have access to a reliable insured vehicle
- Obtain a pre-employment TB Test
- Possess observable computer skills, including word processing, Internet, and database
- Be willing to travel within designated territory and to transport patients/clients when necessary
- Be willing to maintain flexible hours, which may include occasional evenings and weekends as needed
- Ability to lift up to 20 pounds

**Preferred Qualifications:**
- One year or greater field experience in outreach-type activities, conducting screening, providing education and/or case management in a community-based health clinic or social service environment.
- Experience working with people with Mental Illness and/or AODA issues
- Working knowledge of Spanish language (bilingual).
- Broad, effective communication skills.
- Well-developed and effective customer service skills.
- Ability to maintain effective organizational skills and keep clear records.
- Ability to work with a diverse population.
- Knowledge of and sensitivity to HIV/AIDS-related issues,
- Understanding of confidentiality concerns in accordance with HIPAA and Wisconsin Law.

**Other information:**
ARCW is an equal opportunity employer and will recruit, hire, promote and transfer qualified persons into all job classifications without regard to race, color, religion, national origin or citizenship status, sex, gender identity or expression, pregnancy, sexual orientation, age, disability, or military status.