

Session One: Building the Relationship

Approximately: 1 ½-2 Hours

Session One: Activities

- A: Introduce the goals of case management and ARTAS
- B: Discuss concerns about recent HIV diagnosis
- C: Begin to identify personal strengths, abilities, and skills, and assess others' role in impeding or promoting access to services
- D: Encourage linkage to medical care
- E: Summarize the session, the client's strengths, and agreed-upon next steps
- F: Plan for the next session(s), with the medical care provider and/or you

Session One Guide Agenda

- 1A. Introduction
- 1B. Guided Discussion
- 1C. Client Assessment
- 1D. Linkage to Medical Care
- 1E. Review and Summarize the Session
- 1F. Schedule Medical Appointment and/or Next Session

Forms and Documents Needed for Session One:

- *Overview of ARTAS document*
- *Strengths Assessment*
- *ARTAS Session Plan*
- *Resource Directory*
 - *A Listing of Medical and Psychiatric Service Providers and Local Social Service Providers (e.g., housing, food, insurance)*
- *Fact Sheet on Current Treatment Options and their Side Effects*
- *Appointment Cards*
- *Incentives, if provided*
- *Session Notes*
- *Session Notes Summary Sheet*
- *Case Staffing Form*
- *Life Domains List*

Remember: The sessions are client-driven. As such, the agenda, time, content, and forms must be adjusted to the client's needs.

1A: Introduction

Purpose: Introduce yourself and ensure the client understands the goals of case management, ARTAS, and the strengths model used to guide the process.

Forms and Documents: - *Overview of ARTAS Document*

Advanced Preparation:

- Review the Overview of ARTAS Document.

Key Considerations: Remember that:

- A client may be ambivalent about the first session.
- Each client begins at a different place. Some may have just learned of their HIV status; others may have been living with HIV for some time.
- The client may have already overcome some barriers by attending this session.
- The client may have experienced a wide range of emotions leading up to this session, including fear, anger, distrust, helplessness, and fatalism.
- The client might have had negative personal experiences with medical providers in the past.

Caution should be exercised to not self-disclose at this point. At this early stage, it is not possible to know what shared life experiences will enhance or impede your relationship with the client. This applies to issues such as personal faith, HIV status, relationships with others living with HIV or who have died from AIDS, or past substance use.

Procedure:

For all clients:

1. Introduce yourself to the client. Describe your professional background, especially as it applies to working with people living with HIV/AIDS (PLWHA). Emphasize your training, interest in assisting PLWHA, and/or knowledge of HIV/AIDS-specific health care services.
2. Give the client the Overview of ARTAS document. (Note: During the Pre-Implementation phase, you should have created a brief ARTAS summary to reach out to community partners. Give the client that document or a modified version). Either read the overview verbatim or paraphrase its key points. It is important that you confidently convey the key points to the client. The key points for the **ARTAS Overview Document** can be found on page 165 in the Session Forms section.
3. **Next step, continue to 1B: Guided Discussion.**

1B: Guided Discussion

Purpose: To give the client an opportunity to talk about his/her feelings and thoughts related to his/her recent HIV diagnosis.

Forms and Documents: - *Fact Sheet on Current Treatment Options and their Side Effects*

Advanced Preparation:

- Review the Fact Sheet on Current Treatment Options and their Side Effects.

Key Considerations: You should:

- Possess a comprehensive and in-depth knowledge base about HIV/AIDS (the medical, psychological, and social aspects), and be able to answer the client's detailed questions.
- Refer to current resources to answer the client's questions.
- Promote the personal and partner benefits of risk reduction and the value of seeking medical care early.
- Diminish fears or concerns the client might have about treatment and/or visiting a doctor.
- Be realistic about the limitations of treatment – that there is no cure for HIV; however, instill hope related to healthy outcomes in the client.
- Help the client explore personal resources to help him/her to be successful.
- Be careful to neither directly confront nor reinforce the client's statements at this time.

Procedure:

For all clients:

1. Start the discussion with a statement that lets the client know you understand and are aware that it is natural to have many feelings and unanswered questions after receiving an HIV-positive diagnosis. Start the discussion like this:
 - *“When a person finds out they’re HIV-positive, a lot of things go through their mind. How have you been feeling since you found out?”*

Possible open-ended follow-up questions include:

- *“What resources did the health department tell you about when you received your test results?”* and
 - *“What were your biggest worries when you received your positive test results?”*
2. Ask the client what materials about HIV/AIDS the testing site gave him/her, if any. Possible open-ended follow-up questions include:
 - *“What did you think about the material you received?”* or
 - *“What additional questions do you have about HIV/AIDS?”*

3. Clarify any questions the client has about HIV (specifically about symptoms, care and treatment options, support services, and counseling).
4. Review the **Fact Sheet on Current Treatment Options and Side Effects** (see sample on page 165 of the Session Forms section), and offer to give him/her a copy of the document. Possible open-ended follow-up questions include:
 - *“What other questions do you have?”*
 - *“Have you discussed your HIV status with a doctor or nurse since you received your test results? If so, what did you talk about? Do you have additional questions?”* and
 - *“What are your concerns about seeking treatment or medical care?”*
5. **Next step, continue to 1C: Client Assessment.**

1C: Client Assessment

Purpose: Begin to identify personal strengths, abilities, and skills and assess others' role in impeding or promoting access to medical and/or social services.

Forms and Documents: - *Strengths Assessment*

Advanced Preparation:

- Review the state/local legal requirements regarding HIV disclosure.

Key Considerations: You should:

- Use effective communication skills.
- Know the state/local legal requirements regarding disclosing one's HIV status.
- Have natural conversations with the client to identify additional strengths.
- Ask open-ended questions that encourage the client to identify strengths.
- Show the client genuine respect and concern, as this is the starting point of a helping relationship.

Procedure:

For all clients:

1. Explain how identifying the client's strengths, abilities, and skills relates to his/her ability to stay healthy and link to medical care. For example,:
"Often times, when you see ways that you've been successful in the past, it helps you to be successful again. Knowing how you've been successful helps you plan how to deal with barriers or problems you may have getting the medical care you need or achieving other goals."
2. Ask the client to talk about his/her personal experiences. Guide the client to speak from a strengths perspective and about his/her abilities, rather than putting himself/herself down. While the Strengths Assessment is formally introduced in **Session Two**, it is important to start talking about strengths from the very beginning.
3. Cite examples of the client's strengths and abilities that have already become apparent in your conversation or during this session. This will help the client think about personal strengths, resources, and skills. Some common examples include:
 - The courage to get tested for HIV
 - The wisdom to come to Session One of ARTAS
 - The ability or desire to live independently
 - Being punctual, if s/he arrived on time
4. Help the client assess the role others have in supporting or impeding his/her access to medical care. Ask the client:
 - *"Who do you think could support or help you get to the doctor? Think about friends, family, neighbors, significant others, anyone. These are*

people you feel can take you to appointments, let you borrow their car, provide financial assistance, watch your kids, give emotional support, and other things you might need.”

5. Discuss the advantages or disadvantages of telling a significant other or sexual partner(s) about testing positive.

If the client is currently involved in a sexual relationship(s), ask him/her:

- *“Does your significant other/sexual partner(s) know you’re HIV-positive or not?”*

If yes, follow up with:

- *“How do you think you could get [insert name of significant other/partner] to help you get into medical care?”*

If no, follow up with:

- *“What do you think are some of the advantages to telling [insert name of significant other/partner]?”*and
- *“What are some of the disadvantages?”*

Discuss any important advantages or disadvantages that the client did not mention, including any state laws or legal requirements to disclose one’s HIV status to sexual partners (regardless of condom use or other protective measures taken) and/or to health care providers. It is important that you be familiar with these requirements and be able to clearly articulate them to the client.

6. **Next step, continue to 1D: Linkage to Medical Care.**

1D: Linkage to Medical Care

Purpose: Encourage the client to seek medical care, and, if interested, assist him/her in the process to make that linkage.

Forms and Documents:

- *ARTAS Session Plan*
- *Resource Directory*
- *Session Notes*
- *Session Notes Summary Sheet*
- *Case Staffing Form*

Advanced Preparation:

- Review any specific requirements, characteristics/traits, agency policies, and required paperwork of the health care providers.
- Review any local, state, or federal policies such as eligibility requirements for services, Medicaid, ADAP, Ryan White services, wait lists, mandatory disclosure laws.

Key Considerations: Inform the client about the following:

- Care and treatment services provided at your agency and/or your community partners.
- Specific requirements, such as timeliness, rescheduling policies, or paperwork required for health care providers in the area.
- Characteristics or traits of a particular clinic(s) or community partner(s) that match the client's needs. For example, a clinic with bilingual staff or interpreters for a non-English-speaking/limited-English-proficient client.
- Relevant policies (at the agency, local, state, and/or federal levels), issues, or potential barriers, such as eligibility requirements for services, Medicaid, ADAP, Ryan White services, wait lists, mandatory disclosure laws. Focus on policies with the most immediate impact on the client.

Procedure:

For all clients:

1. Ask the client about his/her expectations and concerns about seeking medical care and treatment for HIV. Be sensitive to the client's stated and unstated reasons for not wanting to seek medical treatment. Begin the discussion with these questions:
 - *“What are your thoughts about linking to medical care?”*and
 - *“What barriers or problems might get in the way of your going to a doctor or medical clinic?”*
2. Assess the client's tangible and perceived barriers. The client may have a multitude of personal barriers that impede his/her ability to seek services, such as:
 - Homelessness
 - No transportation

- No financial resources
- Active drug or alcohol addiction

Some of the perceived barriers could be fears about family, friends, and community members discovering his/her HIV status or health care needs.

3. Engage the client in a discussion about medical options, provide information, and help him/her clarify concerns, issues, and barriers. Remember, it is not your role to make the decision to link to medical care for the client.
4. Demonstrate your thorough knowledge of the medical care environment and requirements and provide information based on available resources. This includes:
 - Providers and their specialties and personalities
 - How to navigate the system to apply for and access Ryan White, Medicaid, or other services
 - In other words, all the background research you did in the Pre-Implementation Section to become familiar with community partners

At this point, one of four things is likely to happen. Based on where the client is in his/her decision, follow these instructions:

If the client decides to link to medical care at this point, continue with Step 5.

If the client is not ready to make this decision, skip to 1E: Review and Summarize the Session.

If the client a) wants to drop out of ARTAS, or b) does not want to link to medical care, skip to Step 8.

For clients who wish to link to medical care at this point:

5. Introduce the ARTAS Session Plan:

“Our goal is to help you get connected to a doctor. As you may recall, we will have up to five sessions in 90 days to help you achieve this and other goals by identifying your strengths and overcoming barriers.

The ARTAS Session Plan is one of the activities that can guide us to accomplish your goal(s). This plan will help us organize our work together and make sure that we identify everything we need to work on. We’ll write down the goals to remind us of what we’re doing and you will always have a copy of your most recent ARTAS Session Plan, if you want it.”
6. Follow the **ARTAS Session Plan Instructions** on page 157 of the Session Forms section. The ARTAS Session Plan helps the client identify objectives and possible barriers, activities to accomplish the objective(s), the person responsible, target dates to complete each activity, and the related strength. It is

recommended that the plan be committed to in writing to allow you and the client to easily track progress and pinpoint activities that may need to be adjusted over time.

7. Next step, continue to 1E: Review and Summarize the Session.

For clients who want to drop out of ARTAS or do not want to link to medical care now or in the near future (if at any point the client decides to link to medical care and/or not drop out of ARTAS, continue to 1E: Review and Summarize the Session):

8. Keep the conversation positive! Cover the following topics:
 - a. Engage the client in a discussion about: (1) his/her reasons for attending the first ARTAS session; and (2) his/her reasons for deciding not to continue with ARTAS/seeking medical care.
 - b. Let the client know that ambiguity about linking to medical care is normal.
 - c. Review the client's strengths discussed during the session.
 - d. Discuss his/her accomplishments made during the session and ask how, if at all, the session has been helpful.
 - e. Keep the door open. Remind the client that your sessions together can continue as long as s/he thinks it can help clarify and remove barriers to seeking treatment before the end of the 90 days.
 - f. Offer the client your business card and end the session.

9. **Next step, end the session and complete paperwork:**
 - Depending on your agency's procedures and/or schedule for the day, you may want to take a few minutes to complete all the required paperwork before moving on to the next client and/or task. Recommended paperwork to complete includes:
 - Session Notes
 - Session Notes Summary Sheet (if the client dropped out)
 - Case Staffing Form

1E: Review and Summarize the Session

Purpose: To review what was discussed with the client during the session and summarize the agreed-upon next steps.

Forms and Documents: - *ARTAS Session Plan*

Advanced Preparation: None.

Key Considerations: You should:

- Review the ARTAS Session Plan activities and discuss/revise anything that was documented incorrectly, if a plan was developed.

Procedure:

For clients who wish to link to medical care at this point, or clients who are not ready to make this decision:

1. Provide a summary of the session or ask the client to summarize the session and the client's strengths. During the first session, the client may be very emotional and upset, particularly if s/he has been recently diagnosed. Therefore, summarizing the session is extremely important to help the client remember the key points.
2. Review the ARTAS Session Plan activities, person responsible, and target date to complete the items with the client, if a plan was developed. Remember, some of these are activities you are committing to complete prior to the session.
3. **Next step, continue to 1F: Schedule Medical Appointment and/or Next Session.**

1F: Schedule Medical Appointment and/or Next Session

Purpose: To schedule appointments with you, medical providers, and other support services as needed.

Forms and Documents:

- *ARTAS Session Plan*
- *Resource Directory*
- *Appointment Cards*
- *Incentive, if provided*
- *Session Notes*
- *Session Notes Summary Sheet*
- *Case Staffing Form*

Advanced Preparation:

- Review your availability for the next session and/or medical appointment.
- Review the Resource Directory for medical providers, clinics, and other services as needed.
- Bring the transportation vouchers/tokens/schedules.

Key Considerations: You should:

- Refer the client to services as needed. The client may present with other needs that are related to his/her recent seroconversion or existing HIV status.
- If the client wishes to schedule a medical appointment, provide him/her with detailed information about the clinic hours and services they provide.
- Make sure all paperwork is completed and discuss how client information will be used. Stress privacy and confidentiality.
- Arrange and confirm all appointments with or for the client, medical as well as other services as needed.
- Offer to take the client or provide transportation to all scheduled appointments.
- Work on all identified barriers to following through with scheduled appointments.

Procedure:

For clients who wish to link to medical care at this point:

1. Clarify whether or not the client would like you to accompany him/her to the medical appointment.
2. Discuss the best time and date to schedule the appointment.
 - If the ARTAS Session Plan has activities that must be completed before the medical appointment that may take some time, schedule the appointment further out or wait until the next session to schedule the medical appointment. Examples of activities that might take more time to complete are arranging for transportation and processing Medicaid enrollment forms.
3. Call the clinic or community partner (or have the client call) to schedule an appointment.

- **If the next time you see the client will be at the medical visit:**
 - Give him/her information about the staff and doctor, required documents.
 - Discuss in detail what the client should expect at each stage of the appointment.
 - Help the client write down questions s/he would like to ask the health care provider and/or other clinic staff. Depending on the client, practice asking and answering questions with him/her so s/he feels comfortable with the list of prepared questions.
 - Ask the client if s/he would like for you to call him/her before the medical appointment, as a reminder.

For all clients:

4. Schedule and/or make arrangements for the client to access needed social services, such as temporary housing and food banks.
5. Schedule a day, time, and meeting location for the next ARTAS session. Make sure accommodations are compatible with agency safety guidelines.
 - If the next session is before the medical appointment or the client is not linking to medical care at this point, offer to write down these details and to call the client before your next session as a reminder. The topics covered will follow the format for **Session Two**.
 - If it is scheduled for after the medical appointment, the next session will be **Session Five** (completing the work with the client).
6. Offer the client an **appointment card** (see samples on page 171 of the Session Forms section) to document the time, location, and agency name.
7. Give the client transportation tokens or vouchers to get home and/or to the next session or appointment. Or offer to pick the client up, if that is an allowable activity at your agency.
8. Gather any contact and/or locator information from the client before s/he leaves. Locator information will allow you to locate the client through family, friends, or other individuals that know how to reach him/her if the client's address changes, phone is disconnected, or the client is not reachable through the means provided in the initial intake (conducted within the agreed-upon rules for communicating with the client). Remind the client that you will attempt to contact him/her through these means only after a missed appointment.
 - To gather this information, discuss how the locator information will be used and be sure to inform the client that none of his/her personal information will be shared with the contacts provided. Information collected from the contact persons includes the following: usual place of residence; telephone number or address of someone who usually knows where the client can be found; places where s/he picks up mail or messages.

- Ask the client if the contacts are aware of his/her HIV status and assure the client that his/her contacts will not be told the reason for the call. You can say you are a friend trying to reach the client.
9. End the session by thanking the client for coming and congratulate him/her for a productive session. Remind the client that linking to medical care is important to his/her overall health, and that you are there to help him/her attain services needed so that s/he is ready to access medical care and treatment.
10. **Next step, complete paperwork:**
- Depending on your agency's procedures and/or schedule for the day, you may want to take a few minutes to complete all the required paperwork before moving on to the next client and/or task. Recommended paperwork to complete includes:
 - Session Notes
 - Session Notes Summary Sheet (if the client dropped out)
 - Case Staffing Form

Session Two: Emphasizing Personal Strengths

Approximately: 1 ½ - 2 hours

Session Two Activities:

- A: Solicit client issues and questions from the initial session
- B: Continue identifying personal strengths, abilities, and skills
- C: Encourage linkage to medical care
- D: Identify and address personal needs and barriers to linkage
- E: Summarize the session, the client's strengths, and agreed-upon next steps
- F: Plan for the next session(s), with the medical care provider and/or you

Session Two Guide Agenda

- 2A. Review of Session One
- 2B. Client Assessment
- 2C-D. Linkage to Medical Care
- 2E. Review and Summarize the Session
- 2F. Schedule Medical Appointment and/or Next Session

Forms and Documents Needed for Session Two:

- *ARTAS Session Plan*
- *Strengths Assessment*
- *Resource Directory*
 - *A Listing of Medical and Psychiatric Service Providers and Local Social Service Providers (e.g., housing, food, insurance)*
- *Appointment Cards*
- *Incentive, if provided*
- *Session Notes*
- *Session Notes Summary Sheet*
- *Case Staffing Form*
- *Life Domains List*

Remember: The sessions are client-driven. As such, the agenda, time, content, and forms must be adjusted to the client's needs.

2A: Review of Session One

Purpose: To clarify and address any questions or areas of confusion the client has from the initial contact.

Forms and Documents: - *ARTAS Session Plan*

Advanced Preparation:

- Review the client's ARTAS Session Plan, if one was developed in the previous session.

Key Considerations: Remember that the client:

- Needs support and resources to effectively link to medical care. Be sure to review the client's needs and refer him/her to needed services to assist in accessing medical care.
- Often needs assistance to identify personal strengths and abilities to facilitate his/her linkage to medical care.
- May need to reflect on his/her HIV status and barriers encountered in disclosing his/her status to others and in accessing social services.

Procedure: For all clients:

1. Welcome the client back for Session Two and congratulate him/her on following up successfully with today's session. Recognize the many demands the client has and state how much you appreciate him/her taking time to meet with you.
2. Ask the client what questions, concerns, or new insights s/he has as a result of the first session. You may also want to ask about his/her thoughts about linking to medical care since your last session and any reactions s/he has to the focus on strengths, which will help you to assess whether or not s/he is starting to adopt the new approach.
3. Summarize any additional points made during the discussion.

For clients who have not decided to link to medical care:

4. **Next step, continue to 2B: Client Assessment.**

For clients who have decided to link to medical care but have not yet attended their appointment:

5. Review the outcomes of all activities listed on the ARTAS Session Plan for both you and the client. If necessary, revise the plan.
6. Ask the client about any new barriers and/or strengths discovered as a result of completing the ARTAS Session Plan activities. If necessary, revise the plan.
7. **Next step, skip to section 2E: Review and Summarize the Session.**

2B: Client Assessment

Purpose: To help the client self-identify personal strengths, abilities, and skills.

Forms and Documents: - *Resource Directory*
- *Strengths Assessment*

Advanced Preparation:

- Review the state/local legal requirements regarding HIV disclosure.
- Review the client's Strengths Assessment, if one was started in the previous session.

Key Considerations: You should:

- Use effective communication skills.
- Know the state/local legal requirements regarding disclosing one's HIV status.
- Have natural conversations with the client to identify additional strengths.
- Ask open-ended questions that encourage the client to provide more substantive information to build on the list of strengths developed in Session One.
- Show the client genuine respect and concern, as this is the starting point of a helping relationship.

Procedure:

For clients who have not yet decided to link to medical care:

1. Remind the client how identifying strengths, abilities, and skills relate to his/her ability to stay healthy and link to medical care. For example:
"Often times, when you see ways that you've been successful in the past, it helps you to be successful again. Knowing how you've been successful helps you plan how to deal with barriers or problems you may have getting the medical care you need or achieving other goals."
2. Remind the client of examples of his/her strengths and abilities that have already become apparent in the previous session. This will help the client think about personal strengths, resources, and skills. Some common examples include:
 - The courage to get tested for HIV
 - The wisdom to come to Sessions One and Two of ARTAS
 - The ability or desire to live independently
 - Being punctual, if s/he arrived on time
3. **This is a new activity started in Session Two.** Conduct the **Strengths Assessment** by following the instructions and introduction script starting on page 149 of the Session Forms section.
4. **Next step, continue to 2C-D: Linkage to Medical Care.**

2C-D: Linkage to Medical Care

Purpose: Encourage the client to seek medical care, and if interested, assist him/her in the process to make that linkage.

Forms and Documents:

- *ARTAS Session Plan*
- *Resource Directory*
- *Session Notes*
- *Session Notes Summary Sheet*
- *Case Staffing Form*

Advanced Preparation:

- Review any specific requirements, characteristics/traits, agency policies, and required paperwork of the health care providers.
- Review any local, state, or federal policies such as eligibility requirements for services, Medicaid, ADAP, Ryan White services, wait lists, mandatory disclosure laws.
- Review the client's ARTAS Session Plan, if one was developed in the previous session.

Key Considerations: Inform the client about the following:

- Care and treatment services provided at your agency and/or your community partners.
- Specific requirements, such as timeliness, rescheduling policies, or paperwork required for health care providers in the area.
- Characteristics or traits of a particular clinic(s) or community partner(s) that match the client's needs. For example, a clinic with bilingual staff or interpreters for a non-English-speaking/limited-English-proficient client.
- Relevant policies (at the agency, local, state, and/or federal levels), issues, or potential barriers, such as eligibility requirements for services, Medicaid, ADAP, Ryan White services, wait lists, mandatory disclosure laws. Focus on policies with the most immediate impact on the client.

Procedure:

For clients who have not decided to link to medical care:

1. Ask the client about his/her expectations and concerns about seeking medical care and treatment for HIV. Be sensitive to the client's stated and unstated reasons for not wanting to seek medical treatment. Begin the discussion with these questions:
 - *"What are your thoughts about linking to medical care?"* and
 - *"What barriers or problems might get in the way of your going to a doctor or medical clinic?"*
2. Assess the client's tangible and perceived barriers. The client may have a multitude of personal barriers that impede his/her ability to seek services, such as:
 - Homelessness

- No transportation
- No financial resources
- Active drug or alcohol addiction

Some of the perceived barriers could be fears about family, friends, and community members discovering his/her HIV status or health care needs.

3. Engage the client in a discussion about medical options, provide information, and help him/her clarify concerns, issues, and barriers. Remember, it is not your role to make the decision to link to medical care for the client.
4. Demonstrate your thorough knowledge of the medical care environment and requirements and provide information based on available resources. This includes:
 - Providers and their specialties and personalities
 - How to navigate the system to apply for and access Ryan White, Medicaid, or other services
 - In other words, all the background research you did in the Pre-Implementation Section to become familiar with community partners

At this point, one of four things is likely to happen. Based on where the client is in his/her decision, follow these instructions:

If the client decides to link to medical care at this point, continue to Step 5.

If the client is not ready to make this decision, skip to 2E: Review and Summarize the Session.

If the client a) wants to drop out of ARTAS, or b) does not want to link to medical care, skip to Step 8.

For clients who wish to link to medical care at this point:

5. Introduce the ARTAS Session Plan:

“Our goal is to help you get connected to a doctor. As you may recall, we will have up to five sessions in 90 days to help you achieve this and other goals by identifying your strengths and overcoming barriers.”

“The ARTAS Session Plan is one of the activities that can guide us to accomplish your goal(s). This plan will help us organize our work together and make sure that we identify everything we need to work on. We’ll write down the goals to remind us of what we’re doing, and you will always have a copy of your most recent ARTAS Session Plan, if you want it.”

6. Follow the **ARTAS Session Plan Instructions** on page 157 of the Session Forms section. The ARTAS Session Plan helps the client identify objectives and possible barriers, activities to accomplish the objective(s), the person responsible, target dates to complete each activity, and the related strength. It is recommended that the plan be committed to in writing to allow you and the client to easily track progress and pinpoint activities that may need to be adjusted over time.
 7. **Next step, continue to 2E: Review and Summarize the Session.**
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For clients who want to drop out of ARTAS or do not want to link to medical care now or in the near future (if at any point the client decides to link to medical care and/or not drop out of ARTAS, continue to 2E: Review and Summarize the Session):

8. Keep the conversation positive! Cover the following topics:
 - a. Engage the client in a discussion about: (1) his/her reasons for attending the second ARTAS session; and (2) his/her reasons for deciding not to continue with ARTAS/seek medical care.
 - b. Let the client know that ambiguity about linking to medical care is normal.
 - c. Review the client's strengths discussed during the session.
 - d. Discuss his/her accomplishments made during the session and ask how, if at all, the session has been helpful.
 - e. Keep the door open. Remind the client that your sessions together can continue as long as s/he thinks it can help clarify and remove barriers to seeking treatment before the end of the 90 days.
 - f. Offer the client your business card and end the session.
9. **Next step, end the session and complete paperwork:**
 - Depending on your agency's procedures and/or schedule for the day, you may want to take a few minutes to complete all the required paperwork before moving on to the next client and/or task. Recommended paperwork to complete includes:
 - Session Notes
 - Session Notes Summary Sheet (if the client dropped out)
 - Case Staffing Form

2E: Review and Summarize the Session

Purpose: To review what was discussed with the client during the session and summarize the agreed-upon next steps.

Forms and Documents: - *ARTAS Session Plan*

Advanced Preparation: None.

Key Considerations: You should:

- Review the ARTAS Session Plan activities and discuss/revise anything that was documented incorrectly, if a plan was developed.

Procedure:

For clients who wish to link to medical care at this point, or clients who are not ready to make this decision:

1. Provide a summary of the session or ask the client to summarize the session and the client's strengths. During the session, the client may be very emotional and upset, particularly if s/he has been recently diagnosed. Therefore, summarizing the session and the client's strengths are extremely important to help the client remember the key points.
2. Review the ARTAS Session Plan activities, person responsible, and target date to complete the items with the client, if a plan was developed. Remember, some of these are activities you are committing to complete prior to the session.
3. **Next step, continue to 2F: Schedule Medical Appointment and/or Next Session.**

2F: Schedule Medical Appointment and/or Next Session

Purpose: To schedule appointments with you, medical providers, and support services as needed.

Forms and Documents:

- *ARTAS Session Plan*
- *Resource Directory*
- *Appointment Cards*
- *Incentive, if provided*
- *Session Notes*
- *Session Notes Summary Sheet*
- *Case Staffing Form*

Advanced Preparation:

- Review your availability for the next session and/or medical appointment.
- Review the Resource Directory for medical providers, clinics, and other services as needed.
- Bring the transportation vouchers/tokens/schedules.

Key Considerations: You should:

- Refer the client to services as needed. The client may present with other needs that are related to his/her recent seroconversion or existing HIV status.
- If the client wishes to schedule a medical appointment, provide him/her with detailed information about the clinic hours and services they provide.
- Make sure all paperwork is completed and discuss how client information will be used. Stress privacy and confidentiality.
- Arrange and confirm all appointments with or for the client, medical as well as other services as needed.
- Offer to take the client or provide transportation to all scheduled appointments.
- Work on all identified barriers to following through with scheduled appointments.

Procedure:

For clients who wish to link to medical care at this point:

1. Clarify whether or not the client would like you to accompany him/her to the medical appointment.
2. Discuss the best time and date to schedule the appointment.
 - If the ARTAS Session Plan has activities that must be completed before the medical appointment that may take some time, schedule the appointment further out or wait until the next session to schedule the medical appointment. Examples of activities that might take more time to complete are arranging for transportation and processing Medicaid enrollment forms.

3. Call the clinic or community partner (or have the client call) to schedule an appointment.
 - **If the next time you see the client will be at the medical visit:**
 - Give him/her information about the staff and doctor, required documents.
 - Discuss in detail what the client should expect at each stage of the appointment.
 - Help the client write down questions s/he would like to ask the health care provider and/or other clinic staff. Depending on the client, practice asking and answering questions with him/her so s/he feels comfortable with the list of prepared questions.
 - Ask the client if s/he would like for you to call him/her before the medical appointment, as a reminder.
-

For all clients:

4. Schedule and/or make arrangements for the client to access needed social services, such as temporary housing and food banks.
5. Schedule a day, time, and meeting location for the next ARTAS session. Make sure accommodations are compatible with agency safety guidelines.
 - If the next session is before the medical appointment or the client is not linking to medical care at this point, offer to write down these details and to call the client before your next session as a reminder. The topics covered will follow the format for **Session Three**.
 - If it is scheduled for after the medical appointment, the next session will be **Session Five** (completing the work with the client).
6. Offer the client an **appointment card** (see samples on page 171 of the Session Forms section) to document the time, location, and agency name.
7. Give the client transportation tokens or vouchers to get home and/or to the next session or appointment. Or offer to pick the client up, if that is an allowable activity at your agency.
8. Gather any contact and/or locator information from the client before s/he leaves. Locator information will allow you to locate the client through family, friends, or other individuals who know how to reach him/her if the client's address changes, phone is disconnected, or the client is not reachable through the means provided in the initial intake (conducted within the agreed-upon rules for communicating with the client). Remind the client that you will attempt to contact him/her through these means only after a missed appointment.
 - To gather this information, discuss how the locator information will be used and be sure to inform the client that none of his/her personal information will be shared with the contacts provided. Information collected from the contact persons includes the following: usual place of residence;

telephone number or address of someone who usually knows where the client can be found; places where s/he picks up mail or messages.

- Ask the client if the contacts are aware of his/her HIV status and assure the client that his/her contacts will not be told the reason for the call. You can say you are a friend trying to reach the client.

9. End the session by thanking the client for coming and congratulate him/her for a productive session. Remind the client that linking to medical care is important to his/her overall health, and that you are there to help him/her attain services needed so that s/he is ready to access medical care and treatment.

10. Next step, complete paperwork:

- Depending on your agency's procedures and/or schedule for the day, you may want to take a few minutes to complete all the required paperwork before moving on to the next client and/or task. Recommended paperwork to complete includes:
 - Session Notes
 - Session Notes Summary Sheet (if the client dropped out)
 - Case Staffing Form

Session Three: Learning to Make Contact

Approximately: 1 ½ - 2 hours

Session Three Activities:

- A: Solicit client issues and questions from Session Two
- B: Continue identifying personal strengths, abilities, and skills
- C: Encourage linkage to medical care
- D: Identify and address personal needs and barriers to linkage
- E: Summarize the session, the client's strengths, and agreed-upon next steps
- F: Plan for the next session(s), with the medical care provider and/or you

Session Three Guide Agenda

- 3A. Review of Session Two
- 3B. Client Assessment
- 3C-D. Linkage to Medical Care
- 3E. Review and Summarize the Session
- 3F. Schedule Medical Appointment and/or Next Session

Forms and Documents Needed for Session Three:

- *ARTAS Session Plan*
- *Strengths Assessment*
- *Resource Directory*
 - *A Listing of Medical and Psychiatric Service Providers and Local Social Service Providers (e.g., housing, food, insurance)*
- *Appointment Cards*
- *Incentive, if provided*
- *Session Notes*
- *Session Notes Summary Sheet*
- *Case Staffing Form*
- *Life Domains List*

Note: Many of the activities listed below are similar to the activities in previous sessions. However, there are a few slight variations to the step-by-step procedures listed. The variations are a result of this being the third session conducted, and you may need to expand on specific points to clarify why the client is still facing the same barriers, not deciding to link to medical care, or to continue to identify strengths.

Remember: The sessions are client-driven. As such, the agenda, time, content, and forms must be adjusted to the client's needs.

3A: Review of Session Two

Purpose:

To clarify and address any questions or areas of confusion the client has from Session Two.

Forms and Documents: - *ARTAS Session Plan*

Advanced Preparation:

- Review the client's ARTAS Session plan, if one was developed in the previous session.

Key Considerations: Remember that the client:

- Needs support and resources to effectively link to medical care. Be sure to review the client's needs and refer him/her to needed services to assist in accessing medical care.
- Often needs assistance to identify personal strengths and abilities to facilitate his/her linkage to medical care.
- May need to reflect on his/her HIV status and barriers encountered in disclosing his/her status to others and in accessing social services.

Procedure: For all clients:

1. Welcome the client back for Session Three and congratulate him/her on following up successfully with today's session. Recognize the many demands the client has and state how much you appreciate him/her taking time to meet with you.
2. Ask the client what questions, concerns, or new insights s/he has as a result of the first two sessions. You may also want to ask about his/her thoughts about linking to medical care since your last session and any reactions s/he has to the focus on strengths, which will help you to assess whether or not s/he is starting to adopt the new approach.
3. Summarize any additional points made during the discussion.

For clients who have not decided to link to medical care:

4. **Next step, continue to 3B: Client Assessment.**

For clients who have decided to link to medical care but have not yet attended their appointment:

5. Review the outcomes of all activities listed on the ARTAS Session Plan for both you and the client. If necessary, revise the plan.
6. Ask the client about any new barriers and/or strengths discovered as a result of completing the ARTAS Session Plan activities. If necessary, revise the plan.
7. **Next step, skip to section 3E: Review and Summarize the Session.**

3B: Client Assessment

Purpose: To help the client self-identify personal strengths, abilities, and skills.

Forms and Documents: - *Resource Directory*
- *Strength Assessment*

Advanced Preparation:

- Review the state/local legal requirements regarding HIV disclosure.
- Review the client's Strengths Assessment from the previous session.

Key Considerations: You should:

- Use effective communication skills.
- Know the state/local legal requirements regarding disclosing one's HIV status.
- Have natural conversations with the client to identify additional strengths.
- Ask open-ended questions that encourage the client to provide more substantive information to build on the list of strengths developed in Session One.
- Show the client genuine respect and concern, as this is the starting point of a helping relationship.

Procedure:

For clients who have not yet decided to link to medical care:

1. Remind the client how identifying strengths, abilities, and skills relate to his/her ability to stay healthy and link to medical care. For example:
"Often times, when you see ways that you've been successful in the past, it helps you to be successful again. Knowing how you've been successful helps you plan how to deal with barriers or problems you may have getting the medical care you need or achieving other goals."
2. Remind the client of examples of his/her strengths and abilities that have already become apparent in the previous sessions. This will help the client think about personal strengths, resources, and skills (see page 93 for common examples).
3. Conduct the **Strengths Assessment** by following the instructions and introduction script starting on page 149 in the Session Forms section.
 - **This is a new step added to Session Three to help clients who still have not made the decision to link to medical care:** Take the time to really understand what the client's strengths and abilities are, as well as to help the client identify more of his/her positive attributes. Use open-ended questions to stimulate a discussion with the client. Some sample questions include:
 - *"What strengths have we talked about that you hadn't thought before?"*
 - *"Give me an example of a recent experience where you successfully overcame a barrier, and tell me what you did."*

- *“Tell me some of the things that you, or other people who know you well, would say you are good at.”*
- *“Think about a time that you felt like most things were going well. What were you doing to make them go well?”*

4. Next step, continue to 3C-D: Linkage to Medical Care.

3C-D: Linkage to Medical Care

Purpose: Encourage the client to seek medical care, and if interested, assist him/her in the process to make that linkage.

Forms and Documents: - *ARTAS Session Plan*
- *Resource Directory*
- *Session Notes*
- *Session Notes Summary Sheet*
- *Case Staffing Form*

Advanced Preparation:

- Review any specific requirements, characteristics/traits, agency policies, and required paperwork of the health care providers.
- Review any local, state, or federal policies such as eligibility requirements for services, Medicaid, ADAP, Ryan White services, wait lists, mandatory disclosure laws.
- Review the client's ARTAS Session Plan, if one was developed in the previous session.

Key Considerations: Inform the client about the following:

- Care and treatment services provided at your agency and/or your community partners.
- Specific requirements, such as timeliness, rescheduling policies, or paperwork required for health care providers in the area.
- Characteristics or traits of a particular clinic(s) or community partner(s) that match the client's needs. For example, a clinic with bilingual staff or interpreters for a non-English-speaking/limited-English-proficient client.
- Relevant policies (at the agency, local, state, and/or federal levels), issues, or potential barriers, such as eligibility requirements for services, Medicaid, ADAP, Ryan White services, wait lists, mandatory disclosure laws. Focus on policies with the most immediate impact on the client.

New Considerations for Session Three: Help the client:

- Identify any concerns that the client still has about linking to medical care.
- Share those concerns with you, so you know how best to assist him/her to overcome those barriers and challenges.

Procedure:

For clients who have not decided to link to medical care:

1. Ask the client about his/her expectations and concerns about seeking medical care and treatment for HIV. Be sensitive to the client's stated and unstated reasons for not wanting to seek medical treatment.
 - **This is a new step added to Session Three.** Ask if his/her concerns have changed since the beginning of ARTAS. Begin the discussion with these questions:

- *“What are your thoughts about linking to medical care? How, if at all, have they changed since we started working together?”*
 - *“What barriers do you think are still getting in the way? Or, do you have new barriers that you’ve thought of?”*
2. Continue to assess the client’s tangible and perceived barriers. Remember, the client may have a multitude of personal barriers that impede his/her ability to seek services.
 3. Engage the client in a discussion about medical options, provide information, and help him/her clarify concerns, issues, and barriers. Remember, it is not your role to make the decision to link to medical care for the client.
 4. Demonstrate your thorough knowledge of the medical care environment and requirements and provide information based on available resources. This includes:
 - Providers and their specialties and personalities
 - How to navigate the system to apply for and access Ryan White, Medicaid, or other services
 - In other words, all the background research you did in the Pre-Implementation Section to become familiar with community partners
-

At this point, one of five things is likely to happen. Based on where the client is in his/her decision, follow these instructions:

If the client decides to link to medical care and has not already completed the ARTAS Session Plan, continue with Step #5.

If the client decides to link to medical care and has an ARTAS Session Plan, skip to 3E: Review and Summarize the Session.

If the client is not ready to make this decision, skip to 3E: Review and Summarize the Session.

If the client a) wants to drop out of ARTAS, or b) does not want to link to medical care, skip to Step #8.

For clients who wish to link to medical care at this point and have not already completed the ARTAS Session Plan:

5. Introduce the ARTAS Session Plan:

“Our goal is to help you get connected to a doctor. As you may recall, we will have up to five sessions in 90 days to help you achieve this and other goals by identifying your strengths and overcoming barriers.

The ARTAS Session Plan is one of the activities that can guide us to accomplish your goal(s). This plan will help us organize our work together and make sure that we identify everything we need to work on. We'll write down the goals to remind us of what we're doing and you will always have a copy of your most recent ARTAS Session Plan, if you want it."

6. Follow the **ARTAS Session Plan Instructions** on page 157 of the Session Forms section. The ARTAS Session Plan helps the client identify objectives and possible barriers, activities to accomplish the objective(s), the person responsible, target dates to complete each activity, and the related strength. It is recommended that the plan be committed to in writing to allow you and the client to easily track progress and pinpoint activities that may need to be adjusted over time.
7. **Next step, continue to 3E: Review and Summarize the Session.**

For clients who want to drop out of ARTAS or do not want to link to medical care now or in the near future (if at any point the client decides to link to medical care and/or not drop out of ARTAS, continue to 3E: Review and Summarize the Session):

8. Keep the conversation positive! Cover the following topics:
 - a. Engage the client in a discussion about: (1) his/her reasons for attending the previous ARTAS sessions; and (2) his/her reasons for deciding not to continue with ARTAS/seek medical care.
 - b. Let the client know that ambiguity about linking to medical care is normal.
 - c. Review the client's strengths discussed during the session.
 - d. Discuss his/her accomplishments made during the session and ask how, if at all, the session has been helpful.
 - e. Keep the door open. Remind the client that your sessions together can continue as long as s/he thinks it can help clarify and remove barriers to seeking treatment before the end of the 90 days.
 - f. Offer the client your business card and end the session.
9. **Next step, end the session and complete paperwork:**
 - Depending on your agency's procedures and/or schedule for the day, you may want to take a few minutes to complete all the required paperwork before moving on to the next client and/or task. Recommended paperwork to complete includes:
 - Session Notes
 - Session Notes Summary Sheet (if the client dropped out)
 - Case Staffing Form

3E: Review and Summarize the Session

Purpose: To review what was discussed with the client during the session and summarize the agreed-upon next steps.

Forms and Documents: - *ARTAS Session Plan*

Advanced Preparation: None.

Key Considerations: You should:

- Review the ARTAS Session Plan activities and discuss/revise anything that was documented incorrectly, if a plan was developed.

Procedure:

For clients who wish to link to medical care at this point, or clients who are not ready to make this decision:

1. Provide a summary of the session or ask the client to summarize the session and the client's strengths. During the session, the client may be very emotional and upset, particularly if s/he has been recently diagnosed. Therefore, summarizing the session and the client's strengths are extremely important to help the client remember the key points.
2. Review the ARTAS Session Plan activities, person responsible, and target date to complete the items with the client, if a plan was developed. Remember, some of these are activities you are committing to complete prior to the session.
3. **Next step, continue to 3F: Schedule Medical Appointment and/or Next Session.**

3F: Schedule Medical Appointment and/or Next Session

Purpose: To schedule appointments with you, medical providers, and support services as needed.

Forms and Documents: -*ARTAS Session Plan*
-*Resource Directory*
-*Appointment Cards*
-*Incentive, if provided*
-*Session Notes*
-*Session Notes Summary Sheet*
-*Case Staffing Form*

Advanced Preparation:

- Review your availability for the next session and/or medical appointment.
- Review the Resource Directory for medical providers, clinics, and other services as needed.
- Bring the transportation vouchers/tokens/schedules.

Key Considerations: You should:

- Refer the client to services as needed. The client may present with other needs that are related to his/her recent seroconversion or existing HIV status.
- If the client wishes to schedule a medical appointment, provide him/her with detailed information about the clinic hours and services they provide.
- Make sure all paperwork is completed and discuss how client information will be used. Stress privacy and confidentiality.
- Arrange and confirm all appointments with or for the client, medical as well as other services as needed.
- Offer to take the client or provide transportation to all scheduled appointments.
- Work on all identified barriers to following through with scheduled appointments.

Procedure:

For clients who wish to link to medical care at this point:

1. Clarify whether or not the client would like you to accompany him/her to the medical appointment.
2. Discuss the best time and date to schedule the appointment.
 - If the ARTAS Session Plan has activities that must be completed before the medical appointment that may take some time, schedule the appointment further out or wait until the next session to schedule the medical appointment. Examples of activities that might take more time to complete are: arranging for transportation and processing Medicaid enrollment forms.

3. Call the clinic or community partner (or have the client call) to schedule an appointment.
 - **If the next time you see the client will be at the medical visit:**
 - Give him/her information about the staff and doctor, required documents.
 - Discuss in detail what the client should expect at each stage of the appointment.
 - Help the client write down questions s/he would like to ask the health care provider and/or other clinic staff. Depending on the client, practice asking and answering questions with him/her so s/he feels comfortable with the list of prepared questions.
 - Ask the client if s/he would like for you to call him/her before the medical appointment, as a reminder.
-

For all clients:

4. Schedule and/or make arrangements for the client to access needed social services, such as temporary housing and food banks.
5. Schedule a day, time, and meeting location for the next ARTAS session. Make sure accommodations are compatible with agency safety guidelines.
 - If the next session is before the medical appointment or the client is not linking to medical care at this point, offer to write down these details and to call the client before your next session as a reminder. The topics covered will follow the format for **Session Four**.
 - If it is scheduled for after the medical appointment, the next session will be **Session Five** (completing the work with the client).
6. Offer the client an **appointment card** (see samples on page 171 of the Session Forms section) to document the time, location, and agency name.
7. Give the client transportation tokens or vouchers to get home and/or to the next session or appointment. Or offer to pick the client up, if that is an allowable activity at your agency.
8. Gather any contact and/or locator information from the client before s/he leaves. Locator information will allow you to locate the client through family, friends, or other individuals who know how to reach him/her if the client's address changes, phone is disconnected, or the client is not reachable through the means provided in the initial intake (conducted within the agreed-upon rules for communicating with the client). Remind the client that you will attempt to contact him/her through these means only after a missed appointment.
 - To gather this information, discuss how the locator information will be used and be sure to inform the client that none of his/her personal information will be shared with the contacts provided. Information collected from the contact persons includes the following: usual place of residence;

telephone number or address of someone who usually knows where the client can be found; places where s/he picks up mail or messages.

- Ask the client if the contacts are aware of his/her HIV status and assure the client that his/her contacts will not be told the reason for the call. You can say you are a friend trying to reach the client.

9. End the session by thanking the client for coming and congratulate him/her for a productive session. Remind the client that linking to medical care is important to his/her overall health, and that you are there to help him/her attain services needed so that s/he is ready to access medical care and treatment.

10. Next step, complete paperwork:

- Depending on your agency's procedures and/or schedule for the day, you may want to take a few minutes to complete all the required paperwork before moving on to the next client and/or task. Recommended paperwork to complete includes:
 - Session Notes
 - Session Notes Summary Sheet (if the client dropped out)
 - Case Staffing Form

Session Four: Reviewing Progress

Approximately: 1 ½ - 2 hours

Session Four: Activities

- A: Solicit client issues and questions from Session Three
- B: Initiate the transition process
- C: Continue identifying personal strengths, abilities, and skills
- D: Encourage linkage to care/Identify and address barriers to linkage
- E: Summarize the session, the client's strengths, and agreed-upon next steps
- F: Plan for the next session(s), with the medical care provider and/or you

Session Four Guide Agenda

- 4A. Review of Session Three
- 4B. Transition Planning
- 4C. Client Assessment
- 4D. Linkage to Medical Care
- 4E. Review and Summarize the Session
- 4F. Schedule Medical Appointment and/or Next Session

Forms and Documents Needed for Session Four:

- *ARTAS Session Plan*
- *Strengths Assessment*
- *Resource Directory*
 - *A Listing of Medical and Psychiatric Service Providers and Local Social Service Providers (e.g., housing, food, insurance.)*
- *Appointment Cards*
- *Incentive, if provided*
- *Session Notes*
- *Session Notes Summary Sheet*
- *Case Staffing Form*
- *Life Domains List*

Note: As noted throughout this manual, the transition process begins with the very first contact. However, during the fourth client session, the time-limited nature of the relationship should become particularly relevant and explicitly addressed. Many of the activities listed below are similar to the activities in previous sessions. However, there are a few slight variations to the step-by-step procedures listed. The variations are a result of this being the fourth session conducted; you may need to expand on specific points to clarify why the client is still facing the same barriers, not deciding to link to medical care, or to continue to identify strengths.

Remember: The sessions are client-driven. As such, the agenda, time, content, and forms must be adjusted to the client's needs.

4A: Review of Session Three

Purpose: To clarify and address any questions or areas of confusion the client has from Session Three.

Forms and Documents: - *ARTAS Session Plan*

Advanced Preparation:

- Review the client's ARTAS Session Plan, if one was developed in the previous session.

Key Considerations: Remember that the client:

- Needs support and resources to effectively link to medical care. Be sure to review the client's needs and refer him/her to needed services to assist in accessing medical care.
- Often needs assistance to identify personal strengths and abilities to facilitate his/her linkage to medical care.
- May need to reflect on his/her HIV status and barriers encountered in disclosing his/her status to others and in accessing social services.

Procedure:

For all clients:

1. Welcome the client back for Session Four and congratulate him/her on following up successfully with today's session. Recognize the many demands the client has and state how much you appreciate him/her taking time to meet with you.
2. Ask the client what questions, concerns, or new insights s/he has as a result of the previous sessions. You may also want to ask about his/her thoughts about linking to medical care since your last session and any reactions s/he has to the focus on strengths, which will help you to assess whether or not s/he is starting to adopt the new approach.
3. Summarize any additional points made during the discussion.
4. **Next step, continue to 4B: Transition Planning.**

4B: Transition Planning

Purpose: To plan for and review the transition process between you and the client. **You will not actually disengage from the client at this time. This activity serves as a reminder for you and the client that there is only one session remaining after today's session.**

Advanced Preparation: None.

Key Considerations: Know that the client:

- May be anxious due to problems s/he experienced when addressing barriers and/or accessing social services.
- May think if s/he identifies more barriers, s/he can continue to meet with you after the fifth session.

Procedure:

For all clients:

1. Emphasize the time-limited nature (only five sessions or within 90 days, whichever happens first) of ARTAS and that only one additional session remains after today's session. Be prepared for possible resistance from the client.
2. Review past sessions with the client by focusing on:
 - His/her strengths
 - Concrete examples of barriers the client overcame to attend the ARTAS sessions and/or access other social services
 - His/her plans for linking to medical care (with or without you)
3. Normalize any fear or ambivalence the client may have about linking to medical care without your direct support.
4. Help the client identify valuable things about the work s/he has done on his/her own, and the work the two of you have done together. Ask the client how s/he thinks these things can be applied to linking with medical care or other services. Some sample questions include:
 - *"What do you think about the strengths you've identified in the last three sessions?"*
 - *"How are you better prepared to visit a doctor, when you choose to do so – as compared to when we first started working together?"*
 - *"What barriers did you work on so far? How can you apply that to other barriers?"*
5. If you think the client will likely need a long-term/Ryan White case manager to access other resources and services after ARTAS, formally or informally introduce the client to the new case manager with whom s/he will be working.

For clients who have not decided to link to medical care:

- 6. Next step, continue to 4C: Client Assessment.**
-

For clients who have decided to link to medical care but have not yet attended their appointment:

7. Review the outcomes of all activities listed on the ARTAS Session Plan for both you and the client. If necessary, revise the plan.
8. Ask the client about any new barriers and/or strengths discovered as a result of completing the ARTAS Session Plan activities. If necessary, revise the plan.
- 9. Next step, skip to section 4E: Review and Summarize the Session.**

4C: Client Assessment

Purpose: To continue to help the client self-identify personal strengths, abilities, and skills.

Forms and Documents: - *Resource Directory*
- *Strengths Assessment*

Advanced Preparation:

- Review the state/local legal requirements regarding HIV disclosure.
- Review the client's Strengths Assessment from the previous session.

Key Considerations: You should:

- Use effective communication skills.
- Know the state/local legal requirements regarding disclosing one's HIV status.
- Have natural conversations with the client to identify additional strengths.
- Ask open-ended questions that encourage the client to provide more substantive information to build on the list of strengths developed in Session One.
- Show the client genuine respect and concern, as this is the starting point of a helping relationship.

Procedure:

For clients who have not yet decided to link to medical care:

1. Remind the client how identifying strengths, abilities, and skills relate to his/her ability to stay healthy and link to medical care. The explanation could be as follows:
“Often times, when you see ways that you’ve been successful in the past, it helps you to be successful again. Knowing how you’ve been successful helps you plan how to deal with barriers or problems you may have getting the medical care you need or achieving other goals.”
2. Remind the client of examples of his/her strengths and abilities that have already become apparent in the previous sessions. This will help the client think about personal strengths, resources, and skills (see page 93 for common examples).
3. Conduct the **Strengths Assessment** by following the instructions and introduction script starting on page 149 in the Session Forms section. Take the time to really understand what the client's strengths and abilities are, as well as to help the client identify more of his/her positive attributes. Use open-ended questions to stimulate a discussion with the client. Some sample questions include:
 - *“What strengths have we talked about that you hadn't thought of before?”*
 - *“Give me an example of a recent experience where you successfully overcame a barrier, and tell me what you did.”*
 - *“Tell me some of the things that you, or other people who know you well, would say you are good at.”*

- *“Think about a time that you felt like most things were going well. What were you doing to make them go well?”*

4. Next step, continue to 4D: Linkage to Medical Care.

4D: Linkage to Medical Care

Purpose: Encourage the client to seek medical care, and if interested, assist him/her in the process to make that linkage.

Forms and Documents: - *ARTAS Session Plan*
- *Resource Directory*
- *Session Notes*
- *Session Notes Summary Sheet*
- *Case Staffing Form*

Advanced Preparation:

- Review any specific requirements, characteristics/traits, agency policies, and required paperwork of the health care providers.
- Review any local, state, or federal policies such as eligibility requirements for services, Medicaid, ADAP, Ryan White services, wait lists, mandatory disclosure laws.
- Review the client's ARTAS Session Plan, if one was developed in the previous session.

Key Considerations: Inform the client about the following:

- Care and treatment services provided at your agency and/or your community partners.
- Specific requirements, such as timeliness, rescheduling policies, or paperwork required for health care providers in the area.
- Characteristics or traits of a particular clinic(s) or community partner(s) that match the client's needs. For example, a clinic with bilingual staff or interpreters for a non-English-speaking/limited-English-proficient client.
- Relevant policies (at the agency, local, state, and/or federal levels), issues, or potential barriers, such as eligibility requirements for services, Medicaid, ADAP, Ryan White services, wait lists, mandatory disclosure laws. Focus on policies with the most immediate impact on the client.

New Considerations for Session Four: Help the client:

- Identify any concerns that the client still has about linking to medical care.
- Share those concerns with you, so you know how best to assist him/her to overcome those barriers and challenges.

Procedure:

For clients who have not decided to link to medical care:

1. Ask the client about his/her expectations and concerns about seeking medical care and treatment for HIV. Be sensitive to the client's stated and unstated reasons for not wanting to seek medical treatment. Ask if his/her concerns have changed since the beginning of ARTAS. Begin the discussion with these questions:
 - *"What are your thoughts about linking to medical care? How, if at all, have they changed since we started working together?"*

- “What barriers do you think are still getting in the way? Or, do you have new barriers that you’ve thought of?”
2. Continue to assess the client’s tangible and perceived barriers. Remember, the client may have a multitude of personal barriers that impede his/her ability to seek services.
 3. Engage the client in a discussion about medical options, provide information, and help him/her clarify concerns, issues, and barriers. Remember, it is not your role to make the decision to link to medical care for the client.
 4. Demonstrate your thorough knowledge of the medical care environment and requirements and provide information based on available resources. This includes:
 - Providers and their specialties and personalities
 - How to navigate the system to apply for and access Ryan White, Medicaid, or other services
 - In other words, all the background research you did in the Pre-Implementation Section to become familiar with community partners
-

At this point, one of five things is likely to happen. Based on where the client is in his/her decision, follow these instructions:

If the client decides to link to medical care at this point and has not already completed the ARTAS Session Plan, continue with Step #5.

If the client decides to link to medical care and has an ARTAS Session Plan, skip to 4E: Review and Summarize the Session.

If the client is not ready to make this decision, skip to 4E: Review and Summarize the Session.

If the client a) wants to drop out of ARTAS, or b) does not want to link to medical care, skip to Step #8.

For clients who wish to link to medical care at this point and have not already completed the ARTAS Session Plan:

5. Introduce the ARTAS Session Plan:

“Our goal is to help you get connected to a doctor. As you may recall, we will have up to five sessions in 90 days to help you achieve this and other goals by identifying your strengths and overcoming barriers.”

“The ARTAS Session Plan is one of the activities that can guide us to accomplish your goal(s). This plan will help us organize our work together and make sure that we identify everything we need to work on. We’ll write down the goals to remind us of what we’re doing and you will always have a copy of your most recent ARTAS Session Plan, if you want it.”

6. Follow the **ARTAS Session Plan Instructions** on page 157 of the Client Session Guide Forms section. The ARTAS Session Plan helps the client identify objectives and possible barriers, activities to accomplish the objective(s), the person responsible, target dates to complete each activity, and the related strength. It is recommended that the plan be committed to in writing to allow you and the client to easily track progress and pinpoint activities that may need to be adjusted over time.
7. **Next step, continue to 4E: Review and Summarize the Session.**

For clients who want to drop out of ARTAS or do not want to link to medical care now or in the near future (if at any point the client decides to link to medical care and/or not drop out of ARTAS, continue to 4E: Review and Summarize the Session):

8. Keep the conversation positive! Cover the following topics:
 - a. Engage the client in a discussion about: (1) his/her reasons for attending the previous ARTAS sessions; and (2) his/her reasons for deciding not to continue with ARTAS/seek medical care.
 - b. Let the client know that ambiguity about linking to medical care is normal.
 - c. Review the client’s strengths discussed during the session.
 - d. Discuss his/her accomplishments made during the session and ask how, if at all, the session has been helpful.
 - e. Keep the door open. Remind the client that your sessions together can continue as long as s/he thinks it can help clarify and remove barriers to seeking treatment before the end of the 90 days.
 - f. Offer the client your business card and end the session.
9. **Next step, end the session and complete paperwork:**
 - Depending on your agency’s procedures and/or schedule for the day, you may want to take a few minutes to complete all the required paperwork before moving on to the next client and/or task. Recommended paperwork to complete includes:
 - Session Notes
 - Session Notes Summary Sheet (if the client dropped out)
 - Case Staffing Form

4E: Review and Summarize the Session

Purpose: To review what was discussed with the client during the session and summarize the agreed-upon recommendations and next steps.

Forms and Documents: - *ARTAS Session Plan*

Advanced Preparation: None.

Key Considerations: You should:

- Review the ARTAS Session Plan activities and discuss/revise anything that was documented incorrectly, if a plan was developed.

Procedure:

For clients who wish to link to medical care at this point, or clients who are not ready to make this decision:

1. Provide a summary of the session or ask the client to summarize the session and the client's strengths. During the session, the client may be very emotional and upset, particularly if s/he has been recently diagnosed. Therefore, summarizing the session and the client's strengths are extremely important to help the client remember the key points.
2. Review the ARTAS Session Plan activities, person responsible, and target date to complete the items with the client, if a plan was developed. Remember, some of these are activities you are committing to complete prior to the session.
3. **Next step, continue to 4F: Schedule Medical Appointment and/or Next Session.**

4F: Schedule Medical Appointment and/or Next Session

Purpose: To schedule appointments with you, medical providers, and support services as needed.

Forms and Documents:

- *ARTAS Session Plan*
- *Resource Directory*
- *Appointment Cards*
- *Incentive, if provided*
- *Session Notes*
- *Session Notes Summary Sheet*
- *Case Staffing Form*

Advanced Preparation:

- Review your availability for the next session and/or medical appointment.
- Review the Resource Directory for medical providers, clinics, and other services as needed.
- Bring the transportation vouchers/tokens/schedules.

Key Considerations: You should:

- Refer the client to services as needed. The client may present with other needs that are related to his/her recent seroconversion or existing HIV status.
- If the client wishes to schedule a medical appointment, provide him/her with detailed information about the clinic hours and services they provide.
- Make sure all paperwork is completed and discuss how client information will be used. Stress privacy and confidentiality.
- Arrange and confirm all appointments with or for the client, medical as well as other services as needed.
- Offer to take the client or provide transportation to all scheduled appointments.
- Work on all identified barriers to following through with scheduled appointments.

Procedure:

For clients who wish to link to medical care at this point:

1. Clarify whether or not the client would like you to accompany him/her to the medical appointment.
2. Discuss the best time and date to schedule the appointment.
 - If the ARTAS Session Plan has activities that must be completed before the medical appointment that may take some time, schedule the appointment further out or wait until the next session to schedule the medical appointment. Examples of activities that might take more time to complete are: arranging for transportation and processing Medicaid enrollment forms.

3. Call the clinic or community partner (or have the client call) to schedule an appointment.
 - **If the next time you see the client will be at the medical visit:**
 - Give him/her information about the staff and doctor, required documents.
 - Discuss in detail what the client should expect at each stage of the appointment.
 - Help the client write down questions s/he would like to ask the health care provider and/or other clinic staff. Depending on the client, practice asking and answering questions with him/her so s/he feels comfortable with the list of prepared questions.
 - Ask the client if s/he would like for you to call him/her before the medical appointment, as a reminder.
-

For all clients:

4. Schedule and/or make arrangements for the client to access needed social services, such as temporary housing and food banks.
5. **This is a new step added to Session 4.** Remind him/her the next session will be your last session together. If you think the client will have a difficult time with the transition process, review 4B: Transition Planning again.
6. Schedule a day, time, and meeting location for the fifth ARTAS session. Make sure accommodations are compatible with agency safety guidelines.
 - If the next session is before the medical appointment or the client is not linking to medical care at this point, offer to write down these details and to call the client before your next session as a reminder. The topics covered will follow the format for **Session Five**.
 - If it is scheduled for after the medical appointment, the next session will be **Session Five** (completing the work with the client).
7. Offer the client an **appointment card** (see samples on page 171 of the Client Session Guide Forms section) to document the time, location, and agency name.
8. Give the client transportation tokens or vouchers to get home and/or to the next session or appointment. Or offer to pick the client up, if that is an allowable activity at your agency.
9. Gather any contact and/or locator information from the client before s/he leaves. Locator information will allow you to locate the client through family, friends, or other individuals who know how to reach him/her if the client's address changes, phone is disconnected, or the client is not reachable through the means provided in the initial intake (conducted within the agreed-upon rules for communicating with the client). Remind the client that you will attempt to contact him/her through these means only after a missed appointment.

- To gather this information, discuss how the locator information will be used and be sure to inform the client that none of his/her personal information will be shared with the contacts provided. Information collected from the contact persons includes the following: usual place of residence; telephone number or address of someone who usually knows where the client can be found; places where s/he picks up mail or messages.
 - Ask the client if the contacts are aware of his/her HIV status and assure the client that his/her contacts will not be told the reason for the call. You can say you are a friend trying to reach the client.
10. End the session by thanking the client for coming and congratulate him/her for a productive session. Remind the client that linking to medical care is important to his/her overall health, and that you are there to help him/her attain services needed so that s/he is ready to access medical care and treatment.
11. Next step, complete paperwork:
- Depending on your agency's procedures and/or schedule for the day, you may want to take a few minutes to complete all the required paperwork before moving on to the next client and/or task. Recommended paperwork to complete includes:
 - Session Notes
 - Session Notes Summary Sheet (if the client dropped out)
 - Case Staffing Form

Session Five: Completing the Work

Approximately: 1 ½ - 2 hours

Session Five: Activities

- A: Review the transition process for clients linked to medical care
- B: Review the transition process for clients not yet linked to medical care
- C: Transition to long-term/Ryan White case management or other providers

Session Five Guide Agenda

5A. Review the Transition Process: Linked Clients

OR

5B. Review the Transition Process: Non-linked Clients

AND

5C. Transition to long-term/Ryan White case manager or other providers

Forms and Documents Needed for Session Five:

- *ARTAS Session Plan*
- *Resource Directory*
- *Contact information for long-term/Ryan White case manager and agency*
- *Paperwork for long-term/Ryan White case manager*
- *Session Notes*
- *Session Notes Summary Sheet*
- *Case Staffing Form*
- *Client Satisfaction Questionnaire*

Note: For Session Five, you do not conduct all three agenda items for each client. **For clients linked to medical care, conduct agenda items 5A and 5C.**

For clients who have not linked to medical care (non-linked clients), conduct agenda items 5B and 5C.

Remember: The sessions are client-driven. As such, the agenda, time, content, and forms must be adjusted to the client's needs.

5A: Review the Transition Process – Linked Clients

Purpose: To review the client's progress made during ARTAS and discuss the client's visit with the medical provider.

Forms and Documents: - *ARTAS Session Plan*

- *Resource Directory*

- *List of Community Service Providers (e.g., substance abuse, mental health, housing, food, and insurance)*

Advanced Preparation:

- Review the client's ARTAS Session Plan, if one was developed in the previous session.

Key Considerations: Remember that the client:

- May not be ready to transition from ARTAS and/or end your relationship.

Procedure:

For all clients:

1. Welcome the client back for the last session and congratulate him/her on following up successfully with today's session. Recognize the many demands the client has and state how much you appreciate him/her taking time to meet with you.
 2. Ask the client what questions, concerns, or new insights s/he has as a result of the previous session(s).
 3. Summarize any additional points made during the discussion.
-

For clients who have decided to link to medical care but have not yet attended their appointment:

4. Review the outcomes of all activities listed on the ARTAS Session Plan for both you and the client. If necessary, revise the plan.
5. Ask the client about any new barriers and/or strengths discovered as a result of completing the ARTAS Session Plan activities. If necessary, revise the plan.
6. **This is a new step added to Session Five.** Discuss how the client can continue to use this plan to achieve his/her goals after ARTAS.
7. **This is a new step added to Session Five.** Complete the steps listed under **4F: Schedule Medical Appointment and/or Next Session.** Then, skip to Step #9 in this section.

For clients who attended a medical appointment:

8. Discuss the client's appointment with the medical provider, including his/her reactions and any questions s/he may have. Review with the client what happened during the medical visit and ask what the client thought went well and what could be improved.
-

For all clients:

9. Discuss the barriers that the client identified and overcame during ARTAS. Review strategies that s/he identified as successful. Point out any additional strategies that you noticed that s/he may not have noted.
10. Discuss any remaining barriers that could interfere with the client attending his/her next medical appointment or linking to other support services. Strategize with the client to identify ways that s/he can overcome these. If there are items in the ARTAS Session Plan that the client has yet to complete, obtain a commitment from him/her that s/he will continue to work on these.
11. Ask the client what questions, concerns, or insights s/he has now that s/he completed the intervention. Address any additional issues that arise.
12. Encourage self-help through HIV support groups and linkage to long-term social services. Review the community resources discussed during earlier sessions. Also review the important role the client's family, friends, social groups, and other informal networks can play in supporting his/her continued use of medical care and other services. Provide verbal and written information regarding community services available.
13. **Next step, skip to 5C: Transition to long-term/Ryan White case manager or other providers.**

5B: Review the Transition Process – Non-linked Clients

Purpose: To review the client's progress made during ARTAS and discuss how the client will link to medical care.

Forms and Documents: - *ARTAS Session Plan*

- *Resource Directory*

○ *List of Medical Providers*

○ *List of Community Service Providers (e.g., substance abuse, mental health, housing, food, and insurance)*

- *Paperwork for long-term/Ryan White case management*

Advanced Preparation:

- Review the client's ARTAS Session Plan, if one was developed in the previous session.

Key Considerations: Remember that the client:

- May not be ready to transition from ARTAS and/or end your relationship.
- May feel discouraged or that s/he has failed by not linking to medical care during ARTAS.

Procedure:

For all non-linked clients:

1. Welcome the client back for the last session and congratulate him/her on following up successfully with today's session. Recognize the many demands the client has and state how much you appreciate him/her taking time to meet with you.
2. Ask the client what questions, concerns, or new insights s/he has as a result of the previous session(s). You may also want to ask about the client's thoughts about linking to medical care since your last session and any reactions s/he has to the focus on strengths.
3. Summarize any additional points made during the discussion.
4. Using the ARTAS Session Plan, review the client's progress over the course of the intervention. Discuss the client's strengths and how s/he used these to complete the tasks listed in his/her plan. Emphasize the client's accomplishments during ARTAS.
5. Discuss the barriers that the client identified and overcame during ARTAS. Review strategies that s/he identifies as being successful. Point out any additional strategies that you have noticed s/he may not have noted.
6. Discuss the client's hesitation to link to medical care. Review the psychological and/or physical barriers that are preventing the client from accessing medical care. Discuss with the client how s/he can overcome these barriers. If the client

desires, revise the ARTAS Session Plan to reflect concrete steps s/he can take, post-ARTAS, to link to medical care.

7. Remind the client about the benefits of early entry into medical care. Provide him/her with contact information for community medical providers and promote the client's independent contact with the clinic. Offer him/her the opportunity to call you one additional time following his/her independent clinic visit.
8. Ask the client what questions, concerns, or insights s/he has now that s/he completed the intervention. Address any additional issues that arise.
9. Encourage self-help and linkage to medical and long-term social services. Review the community resources discussed during earlier sessions. Also review the important role the client's family, friends, social groups, and other informal networks can play in supporting his/her linkage to medical care and other services. Provide verbal and written information regarding other community services available.
10. **Next step, continue to 5C: Transition to long-term/Ryan White case manager or other providers.**

5C: Transition to long-term/Ryan White case manager

Purpose: Explain to client the purpose of long-term/Ryan White case management services and how it differs from ARTAS. Facilitate the transition to the new case manager.

Forms and Documents:

- *Contact information for long-term/Ryan White case manager*
- *Session Notes*
- *Session Notes Summary Sheet*
- *Case Staffing Form*
- *Client Satisfaction Questionnaire*

Advanced Preparation:

- Ask the new long-term/Ryan White case manager to be available during the client session so s/he can meet the client.
- Bring the name and contact information of the long-term/Ryan White case manager.

Key Considerations: Remember:

- The client may be unsure about what to expect from long-term/Ryan White case management or the new case manager.
- The client may be hesitant to connect with a new case manager.
- To ask the long-term/Ryan White case manager to join the session, if the client agrees.

Procedure:

For all clients:

1. Explain what the client can and cannot expect from long-term/Ryan White case management and how it differs from ARTAS, as follows:
 - While ARTAS focused mainly on overcoming short-term barriers to linking to medical care, the long-term/Ryan White case manager can work with the client on more general issues such as housing, employment, other treatment needs.
 - The relationship with the long-term/Ryan White case manager will not be as intensive as his/her relationship with you. As a result, the case manager may not be able to accompany the client to appointments.
 - The relationship between the client and long-term/Ryan White case manager will not be restricted to 90 days or five sessions.
 - The client will still be expected to actively participate in his/her care.
2. Emphasize how the client can use the strengths identified during his/her participation in ARTAS to overcome barriers to services provided by the new case manager. Validate the client's concerns by saying: *"This kind of case management is different and you won't be working with me. But you can have a similar working relationship with your new case manager."*

3. Answer any questions and address any concerns the client has about this new form of case management.
4. Ask the client if s/he would be open to having the long-term/Ryan White case manager join the session, if s/he is available. Note: Plan in advance with the new case manager and ensure s/he is available.
 - a. If the client would like to meet the new case manager, bring him/her into the session and introduce them to each other. Ask the client to tell his/her story, share the work s/he has done in ARTAS, and the strengths s/he has identified. Ask the client to discuss the barriers that s/he identified through ARTAS and what s/he has done to overcome them. Review any other barriers to accessing medical care or support services that will need to be addressed. Discuss any other issues that have arisen during ARTAS that the client will need to address during long-term/Ryan White case management.
 - b. If the client is not comfortable having the long-term/Ryan White case manager join the session, discuss his/her reluctance. Discuss how the client will access case management on his/her own and how s/he can overcome barriers or discomfort to doing so. Review the benefits of case management and what the client can gain from participating. Provide the client with the contact information for his/her long-term/Ryan White case manager, and ask his/her permission to give his/her contact information to the new case manager.
5. Complete all paperwork necessary to transfer the client to another agency and/or case manager, if this is in the MOA between your agency and community partner. This could include discharge forms for your agency, intake/referral forms for the partner agency, and updates on client progress/status.
6. Thank the client for coming and congratulate him/her for completing the intervention and working with you. Remind the client that linking to medical care is important to his/her overall health, and that you hope s/he uses the skills you talked about to obtain services needed so s/he can access medical care and treatment.
7. End the session by asking the client to complete the **Client Satisfaction Questionnaire**, on page 187 in the Session Forms section.
8. **Next step, end the session and complete paperwork:**
 - Depending on your agency's procedures and/or schedule for the day, you may want to take a few minutes to complete all the required paperwork before moving on to the next client and/or task. Recommended paperwork to complete includes:
 - Session Notes
 - Session Notes Summary Sheet (if the client dropped out)
 - Case Staffing Form

