

SOAR Dialogue Highlights

9/15/16

Attendees: Emily Carmody, Pamalia Davis, Tracy Miller, Candice Chilton, Tashira McGill, Elizabeth Lewin

Introductions

- Emily Carmody, NCCEH, Raleigh- Have two announcements before the discussion
- Pamalia Davis, Housing for New Hope, Durham- Had a great Disability Workgroup in Durham with Emily Carmody as a guest speaker
- Candice Chilton and Tashira McGill, LATCH, Durham- Tashira has joined Candice in Durham to complete the SOAR team at LATCH
- Tracy Miller, PATH Team, Fayetteville- No updates this month
- Elizabeth Lewin, PATH Team, Statesville- People are disappearing in the middle of cases right now which is frustrating

Announcements

- Expanding medical sources with SSA open for comments
 - Emily sent out email re: SSA opening a policy about expanding medical sources to include NPs to the group
 - Comments are due November 8th
 - Emily will send out comments that will be submitted on behalf of NCCEH for caseworkers to use in their comments
 - All SOAR caseworkers need to submit comments so SSA can hear feedback about this policy and how it affects applicants who are homeless or at risk of homelessness
- SOAR trainings
 - NCCEH is hoping to schedule the next SOAR training for October in the Triangle region
 - Anyone who is interested should email soar@ncceh.org to be put on the list to be notified as soon as it is scheduled
- SOAR caseworkers requested that the annual report submitted for NC be shared- Emily will email that report to the SOAR Dialogue group

Collecting Functioning Information and Writing about Functioning Issues

The functioning section of the Medical Summary Report is one of the most important sections. Functioning information is not often captured in medical documentation and is necessary to show in order to meet a listing with SSA. For physical listings, the functioning problems are laid out in detail in the listing (trouble ambulating, paralysis on one side of the body, etc.). Mental health listings are looking for functioning problems in four key areas: activities of daily living; social functioning; concentration, persistence, and pace; and repeated episodes of decompensation.

Functioning issues must be connected back to the disabling conditions by finding the root symptom(s) that are causing the functioning issue and showing this link in the report. Also, SOAR caseworkers need

to distinguish if the functioning problem is a matter of access (don't have a shower) vs. impairment (does not shower because is unaware of body odor).

Listed below are notes about common challenges SOAR caseworkers face with functioning information and tips from fellow caseworkers about addressing these challenges.

Challenges with interviewing about functioning issues

- Sometimes applicants are embarrassed to discuss functioning problems
- Applicants have created coping skills to aid with functioning so may not recognize it as a problem anymore (i.e. telling the bus driver where they need to go so they can be told when to get off the bus)
- Tips for interviewing
 - Make sure you are at a good point of engagement with the applicant so they feel safe to share
 - Look for body language while interviewing: pauses in answering, facial expression, emotional responses
 - Provide a personal examples of functional limitations if you have them

Difficulty with physical listings because of technical language and functioning information is not in the records

- Many caseworkers are more comfortable working with mental health listings and the functioning seems easier to document because it affects so many areas
- Physical listings have stricter criteria that medical records do not address
- Tips
 - Use Google and the internet to explore what the listing says and what testing is indicated in the medical listing to understand what functioning problems they indicate
 - Find an ally who is a medical professional (NP, PA, doctor, nurse) who can explain physical listing requirements to you

Ongoing functioning issues not in the medical records

- With physical issues, often the incident that caused the impairment or the surgery are noted in the records but ongoing treatment and functional issues are not
- This lack of documentation could be that the person does not have access to ongoing treatment and/or because they are not telling their doctor about these issues
- Tips
 - Talk to the applicant before doctor appointments to explain the role of medical records and think through what they want to be sure to tell the doctor about what is happening with them
 - Go with the applicant to appointments if the provider is agreeable
 - SOAR caseworkers also need to be medical advocates for applicants in cases where the applicant is being disregarded or not listened to

Making sure to link the functioning problem back to the impairment

- Many caseworkers have issues with making sure that the functioning issues described in the report are linked back to the disabling condition
- Caseworkers need to do this by finding the root symptom(s) that is causing the functioning issue
- Tips
 - Look at the listing before the interview for the symptoms of the impairment so you can see when they come up in the interview

Substance abuse and how it affects functioning

- A key piece to showing DDS that substance use is not material to the case is to highlight functioning problems that persist in sobriety whether that is current or in past episodes of sobriety
- Emphasize to DDS that these functioning problems would most likely persist or are persisting despite not using drugs and alcohol

Functioning abilities change when receiving a high level of care

- Many SOAR applicants see functioning improve when they are in a highly structured environment (hospital, prison, jail) or when they are receiving a high level of services (ACT Team)
- DDS can take the level of services that applicants need in order to have baseline functioning into account on the case and will not hold this against the applicant
- Tips
 - Highlight issues of medication compliance and ER visits that happen once released from structured environments

Next SOAR Dialogue Call will be on October 27, 2016 at 10 AM.

Please register for the call here: <http://www.ncceh.org/events/1005/>