Standard Pathways Procedures

Overview: The Pathways model aims to achieve meaningful outcomes for clients, which are reached by following a step-by-step approach (Pathways) for each of the needs, problems, or barriers that inhibit improved health for the client. Benchmarks are clearly recognized and documented that help the client move toward successful completion of each Pathway.

Instructions:

- Steps 1-3 apply to all clients and describe the process of entering the Pathways Project. Step 4 is the first specialized step in each pathway. A check-in step (Step 6 or 7) is included in every pathway to assess the client's progress and challenges.
- Every pathway includes 3 payment Benchmarks: Benchmark #1 is associated with the Risk Scoring Questionnaire, Benchmark #2 is associated with an intermediate outcome which occurs after the client has received some services, and the Final Benchmark is associated with the final outcome and completion of that pathway.
- The client's referrals, progress, and barriers are recorded in the database to document their experience.

Step 1 (applies to all): Navigator (CHN) identifies candidate for Pathways, asks the individual if they are being seen by another organization, and initiates conversation and trust building. CHN guides client through the consent process, collects general information (pre risk assessment intake sheet), inquires about basic needs (i.e. presently in crisis, has immediate safety needs, hunger, shelter, lacking an I.D.), and assesses if client is a strong candidate for Pathways and the next step, the Risk Score survey.

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Step 2 (applies to all): CHN informs client about Pathways Project and model and then conducts Risk Scoring questionnaire to collect more detailed information and determine Pathways eligibility. CHN consults with supervisor re: managing immediate crisis (if applicable), and enters appropriate data into the Pathways database.

(Payment - Benchmark #1)

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Step 3 (applies to all): In consult with client, CHN prioritizes Pathways, provides basic orientation on individual pathways, makes appropriate referrals, and provides client with a specific person's name and contact information at the referral agency.

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Standard Pathways Procedures

Housing Pathway

Step 4: CHN determines eligibility for specific housing programs (i.e. Section 8, Supportive Housing Coalition of NM, Mortgage Finance Authority, etc.) and how present conditions may inhibit access to certain programs. Identify potential barriers to housing (i.e. lack of I.D., legal problems, previous eviction[s], other).

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Step 5: CHN and client contact appropriate organization[s] and schedule an appointment to meet and discuss housing options. CHN helps client prepare for meeting with referral agency (i.e. required documentation, child care, transportation, hours of operation, etc.). CHN confirms that client kept appointment and has at the very least, been put on a waiting list for housing and provided with a name and contact person to periodically follow up with.

(Intermediate Payment – Benchmark #2)

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Step 6: CHN meets with client and asks if they are satisfied with services offered by the housing program and asks whether the client feels as if she/he is making progress in this pathway, and/or if they have run into any barriers during this process. CHN and client check in with housing agency to assure that their name is moving up on the list.

Note: Re-visit option for obtaining health care home.

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Outcome: CHN confirms that client is placed and has moved into an affordable housing unit for a minimum of 2 months.

(Final Payment – Level 2 Benchmark #3)

Standard Pathways Procedures

Health Care Home Pathway

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Step 4: CHN determines which clinic they will refer client to and makes an appointment. If wait time is greater than 60 days, CHN refers to an alternative site (especially if urgent) CHN discusses coverage enrollment process and options for self-pay discount for those who do not qualify.

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Step 5: CHN confirms that client completed the first primary care appointment and that a financial assistance plan is in place.

(Benchmark #2)

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Step 6: CHN meets with client and asks if they are satisfied with services received at the clinic/hospital. Client is aware of financial options that they qualify for and has knowledge about the appeal process if needed.

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Step 7 (Outcome): CHN confirms that the client has seen a provider a minimum of 2 times and that client has established a comfortable relationship with the provider, has confidence in asking questions, is treated respectfully, received whole-person care, and understands follow-up treatment plan if applicable.

(Benchmark #3 – Level 2)

Standard Pathways Procedures

Heat & Utilities Pathway

Step 4: CHN determines eligibility for specific programs/referrals and how present conditions may inhibit access to certain programs.

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Step 5: CHN and client contact appropriate organization[s] and schedule an appointment to meet and discuss eligibility options. CHN helps client prepare for meeting with referral agency (i.e. required documentation, child care, transportation, hours of operation, request for bills from utility companies, etc.). CHN confirms that client kept appointment and has a potential solution to follow up on.

(Intermediate Payment – Benchmark #2)

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Step 6: CHN meets with client and asks if they are satisfied with services offered by the utility program and asks whether the client feels as if she/he is making progress in this pathway, and/or if they have run into any barriers during this process.

Note: Re-visit option for obtaining health care home.

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Outcome: CHN confirms that client is receiving the necessary assistance to keep all appropriate utilities turned on and functioning for a minimum of 2 months.

(Final Payment – Level 2 Benchmark #3)