



Pathway Home 2019 February Newsletter

Barry's Message



It's not even 9am yet and my phone rings.

"Good morning, this is Barry" I quickly answer curious about the early morning call.

"Hey Barry, its Keeley" a Pathway Home case manager.

"Hi Keeley. Everything okay, what's going on?"

"Edgar has his first behavioral health appointment this morning, it is his intake. We arranged for transportation and pick up was scheduled for 8am, the appointment is at 9. I have been on the phone with the transportation company for the past hour trying to find out when they will be coming. The company has sent 2 drivers now but neither has shown up."

"Oh, wow. That's frustrating and I know how important this appointment is. Well how can I help?"

"I wanted to see if we can order an Uber? I am worried if we do not start making our way to the clinic, Edgar will miss his appointment."

"Not a problem Keeley. Looks like there is an Uber just 4 minutes away. I will order and send you the driver's details."

PH is designed to assist at the most crucial moments, the period following a move from one setting to another. Obstacles accessing healthcare can be confronted and instantly remedied, resulting in lasting, desirable outcomes. PH can draw on diverse interventions to contribute to the solution, including tapping into modern, emerging technology like Ridesharing.

The team begins visiting individuals in referred setting ahead of the transition. On the move day, team accompanies home, attending immediately to necessities, including transportation. Staff go along to initial medical and behavioral health appointments ensuring care continues in new location.

Successful adjustment in community goes beyond just seeing the doctor and partaking in treatment. It includes connection to social supports, achieving financial security, vocational and educational opportunities, and access to food and housing. Many of these supports are in the community outside of the home, requiring adequate transportation to access.

As a case management service, we repeatedly observe how lack of transportation keeps people from receiving care. Nonemergency medical transportation is used often but may not always be an option if insurance is not active.

To use a ridesharing application like Uber has therefore been valuable. It is

not seen as the solution to a complex and pervasive problem. Rather, being able to use Uber is one of the tools in a case manager's toolbox. Some individuals have mobility issues but their insurance isn't active yet. Without the Uber, they wouldn't make it to their appointment, as public transportation may not be a safe and viable option. Symptoms like anxiety or paranoia create internal barriers making bus and subway travel difficult. Using Uber ensures appointment attendance, while team can simultaneously work to address the barriers to ongoing care. For example, travel training to address skill and comfort with the public transportation system.

Other times, it is just a small token of good will, that someone cares enough to make traveling simpler. This effects trust and satisfaction in the healthcare system, a system at risk of low customer satisfaction, and addresses an often unspoken cause of missed appointments.

Gerald is one of the Pathway Home peers and is scheduled to accompany Tiana to her appointment. She just came home from the hospital this week. "Tiana, it is time to go to your appointment"

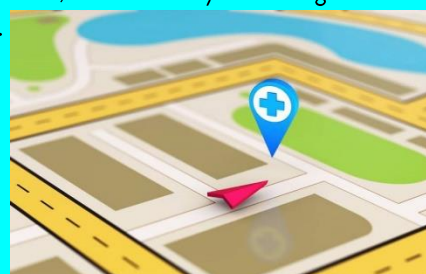
"I am not going!" Gerald observes Tiana is getting agitated.

"I see that something is upsetting you. This is important, it is your first appointment with this clinic."

That did not work. Discussion ensues and Tiana is asked about her feelings. She is anxious about taking public transportation. This is a surprisingly common reaction for individuals in NYC with severe mental illness, who need to navigate a complicated MTA system that is fraught with delays, crowded trains or busses, and angry customers. Then an idea...

"Would you come with me if I call a cab?" Gerald thinks he may be getting somewhere. Tiana went to her appointment that day. Medicaid wasn't active yet when she returned to the community. Once activated, Gerald was able to apply for transportation that Tianna was comfortable with.

It may be true that Ridesharing applications require a certain technological proficiency that may not be existent in certain populations, such as individuals who have spent an extended period of time hospitalized or incarcerated. It is the PH experience that when used together with a case manager that has a personal connection with the individual, eliminating the need for technology proficiency, that Ridesharing can be an effective and cost-effective tool in increasing appointment attendance, improving access to healthcare, and ultimately increasing customer satisfaction in healthcare system.



Warm Regards,

Barry Granek



Introducing the New Crew



Exciting new partnership happening between Community Access' Pathway Home Team and Bellevue Hospital! The Community Access PH team has begun accepting referrals from Bellevue. The team will be engaging members during their hospital stays while simultaneously helping those members get ready to transition back into the community. The entire inpatient social work team at Bellevue met with the Community Access Pathway Home team on 2/6 for a kick-off! The in-patient team is excited to send referrals to the Pathway Team.



WellLife Network AH+ Pathway Home team enrolled their first member on 3/7/19! They have begun coordinating services to facilitate transitions out of the Adult Home! Postgraduate Center for Mental Health (PGCMH) AH+ Pathway Home team successfully transitioned their first member! They continue to build partnerships within the community with agencies involved in the Adult Home settlement like housing contractor, Jewish Board. The Jewish Board housing contractor team met with the PGCMH Pathway Home team in February and will continue to meet on a monthly basis to join forces in transitioning members into the community and overcome any barriers in the way of a successful transition home.



MasterChef Duke

Duke in new apartment preparing dinner



Alexis Dominguez, the Senior Mental Health Clinician on the PH BPC Embedded Team

Throughout his life Duke struggled between knowing he needed assistance with his mental health and being willing to accept help. After a series of psychiatric hospitalizations, he understood taking his medication kept him and those around him safe. “I don’t like who I am off my medication” he says.

Duke’s past often played through his mind like an old movie; the struggle to maintain sobriety, to stay away from those people and places he felt so compelled to explore, refusing help from outpatient providers, and the seemingly constant rapid decompensation that led to paranoia and violence after not taking his medication. The same scenes, the same plot lines, the same four walls of his inpatient room that led him to despair and hopelessness. Duke knew he was beginning to lose the battle between being motivated to leave and slipping into the all too familiar life at BPC. He had no interest in the fancy words the staff used to describe his “symptoms,” but felt a slight glimmer of hope when his social worker talked about housing.

It was clear that his treatment team had decided he should work with some program, Pathway Home. A woman named Alexis, came to explain the program and how they could help, but those words too fell quickly into the abyss of wake up, eat, hang out, eat, sleep... you know. However, Alexis continued to show up to help. Duke went on a couple housing interviews during this time, not allowing himself to get too excited about what could be. He soon found out he would

be discharged to the TLR, “I’m leaving ?” Once again Alexis shared how she would be able to assist in the community, Duke agreed. He could help. Alexis began visiting Duke at the TLR and even went with him to his appointments off the BPC campus. They began to build a positive rapport, she helped Duke at his psychiatrist appointments, asked about his family, went to lunch to just talk, and helped with making sure he had his immediate needs met. Before Duke knew it, his motivation to remain healthy had returned and with that change came the news that he could move into Shakespeare Residence. One of the many interviews he had previously been on.

After one short month at the TLR, Duke moved into Shakespeare with the assistance of Alexis and his ICM. Alexis worked closely with both Duke and his residence staff to ensure that he was comfortable in his new environment and linked to any and all

community resources and programs that would benefit him. Duke would benefit him. Duke knew Alexis was truly there to help him succeed, she accompanied him to appointments, helping with travel training, and collaborated with his brother to ensure a positive relationship was built in the community.

Duke has remained in the community and without hospitalization for 9 months. He independently travels to and from all his outpatient appointments and attended a computer literacy training program at White Plains Road Clinic. He recently enrolled in Fountain House adult day program and will be utilizing their vocational supportive services with the hope to become employed again. Duke officially graduated from Pathway Home is motivated to change the narrative of his past towards his road to success!

Mely's Journey to Re-define Strength

Mely came to Metropolitan Hospital after being domiciled in Rikers Island, for the very first time in her life. She was arrested for trespassing and resisting arrest when an officer was attempting to help her into an ambulance. Mely was also under the influence of marijuana and K2 at the time and during her psychiatric exams displayed very little insight into her Mental Health treatment and goals. She was designated CPL 730 and brought to Metropolitan Hospital for further observance and stabilization on medication. Mely met the MHC Embedded team clinician, Shannon, in the emergency room and she immediately expressed interest in receiving services from the MHC PH embedded team.

Shannon engaged Mely daily on the unit and participated in inpatient treatment team meetings. Mely experienced a bit of difficulty with impulse control and responded positively to medication. She was pleasant to engage, but did not have a clear understanding of why PH was meeting with her and “being so kind.” When Shannon asked if she wanted a cup of coffee she timidly responded that “I would love a caramel coffee from Dunkin Donuts” but insisted that Shannon not buy the coffee. Shannon spent time explaining all of the supports Pathway Home can provide and other linkages she can offer. Mely, ambivalent about services, was at times noncommittal. She stated that due to her Islamic faith she relies on her parents for support and did not think a program would be helpful. Shannon assured her that we would follow her direction and go at her pace and work with her and her family to have her linked with the services where she feels most comfortable with.

Over time, as trust was built, Mely shared feeling as though sometimes her parents don't know what it is that she needs to be okay and that having a team to assist her and her family would help her stay on the right track. Shannon referred Mely for Staten Island MIT as well as care coordination via CBC as Mely lives in Staten Island. Shannon researched clinics for mental health and substance use treatment and scheduled an appointment at Bridge Back to Life Clinic. This occurred after Shannon learned that the unit social worker having trouble scheduling an appointment in Staten Island, and Shannon accompanying Mely and her parents to the Medicaid office at Metropolitan Hospital to re-activate benefits along with assisting in the pharmacy with picking up medication. The parents were very concerned about their daughter experiencing another crisis associated with her substance use or medication non-adherence. Shannon offered the family resources they can use to avoid re-arrest or re-hospitalization, including the number for the New York City co- response team and mobile crisis team.

Shannon maintained contact with Mely and her family and



Left to Right: SMHC Shannon Cameron for the MET-Embedded team, SW Olga Gonzalez and SW Alberto Perez

learned that Mely successfully attended her outpatient appointment in Staten Island with the support of her mother. Shannon offered to visit at the end of the week following discharge but Mely and her family scheduled to go to mosque for religious observance. “I was very pleased that Mely and her family were able to reconnect since it seemed that she was very concerned about her parent’s impression of her being hospitalized following her arrest” remarked Shannon. “Her primary goal was returning to her family.” Mely’s mother called Shannon to thank her, “my daughter is much better than before and we are happy to have her home. We are now bonding and working together.” She also shared that she did not like to accept that her daughter had these treatment needs but has come to understand the importance of being in partnership with her daughter as she goes through treatment. Both mom and dad are now committed to assisting Mely with maintaining her treatment and stability.

Becoming Confident with James



James is an incredibly bright individual with multiple degrees. He previously struggled with loneliness, this was a contributor to his illness in the past. When identifying goals, deliberate to address loneliness, James identified establishing himself in his new community, becoming confident navigating the area, and exploring vocational interest.

Initial engagement consisted of spending considerable time together with team, twice weekly. Team commuted with James to and from his new outpatient mental health provider. This time together helped James begin learning the general layout of a new

neighborhood and receive travel training to get to his weekly appointments for bloodwork and therapy. These trips offered a chance to build the therapeutic alliance and rapport with PH team. An established trust allowed for deeper communication and

“I will be able to spend some time every day completing projects I am interested in.” - James

engagement around the ways James struggled over time. James opened up about the past few years, when his struggles became so difficult he had to leave his apartment and job.

James often discussed his family dynamics, relationships with peers from school, and the ways in which he sees his position in the world. This demonstrates James’s insight, judgment, and life goals. While he had achieved very impressive educational goals in his earlier years, James was able to recognize that he did not have to pursue the same professional or vocational trajectory moving forward. With this desire to see what other vocational avenues existed, James sought to hone and use transferrable skills from his prior experience. Together with team, he enrolling in ACCES-VR and has begun meeting with a vocational counselor. “I am excited to start the job training program” James said “I will be able to spend some time every day completing projects I am interested in.”

James attends all his appointments by himself and his SSDI and food stamps benefits were activated. More importantly, he has a positive outlook and feels confident that his affairs are in order so that he’ll be able to take on the next phase of his life.

Bernie's Clean Slate

Due to the dangerous nature of his home, Bernie had not been able to attend outpatient services in months. He had a severe hoarding and bed bug infestation issue. He hadn't been taking medications since his clinic would not allow him to attend in fear of spreading bed-bugs. Bernie's ADL's had suffered as well and his family felt unable to support him because of their inability to enter his home.

Due to the unhealthful environment his home posed, it was decided that staff would not visit the home until a resolution occurred. Bernie still deserved to receive services and so PH staff decided that the best way to provide this was through video-conferencing. This allowed PH to see enroll, assess situation, and provide services and support. During video-conference, PH staff observed bedbugs crawling on Bernie's clothing and face. The team hired exterminators and a cleaning crew to perform an extensive cleaning. While it was upsetting to RG to part with some of his belongings, his living conditions improved dramatically, both aesthetically and health-wise.

With PH support, Bernie's wife went to court for medical guardianship and was awarded guardianship while an accountant was appointed to assist with the finances.

Bernie had been worried that he may be at risk of losing his home, however the accountant is now working with the family to develop different options in which Bernie can maintain his residence.

Due to the cleaning, Bernie is now able to receive services that he was disconnected to previously. At PH graduation, Bernie is setup with outpatient services at CCNS Corona Clinic and is prescribed medication. He receives Home Health Aide Services and VNS services, where a nurse comes to visit with him 3 days a week to check on his medical health and encourage him to care for his ADL's. Bernie receives Meals on Wheels Services, and allowed PH to purchase a trash can where he will now put his food, something he was not throwing out previously.

At PH graduation, Bernie's wife reported that she has noticed a change in Bernie's mood, stating that "he's showering and a bit calmer". She reports that his ADL's have improved and that Bernie is now showering at least 2 times a week. Bernie has been consistent in attending his appointments and is taking his medications. Most impressively, during the final PH visit, the apartment was clean and no bugs were present.





Boots on Ground

Personal PH Motto:

**“Pathway Home,
Let us bring you
home!!”**

**SHANNON CAMERON
SENIOR MENTAL HEALTH
CLINICIAN, SUS-MET EMBEDDED**



By Angelo Barberio

The month of February brought Shannon Cameron to the Boots on the Ground spotlight! Shannon is a Senior Mental Health Clinician with the SUS- MET Embedded Pathway Home Team. We talked all things Pathway Home as well as about her background and interests.

Me: So Shannon, How long have you been working for SUS? Pathway Home?

Shannon: “I’ve been working with SUS since Oct 2017 but actually joined the Pathway home Family in 2015 with the ICL team and joined the SUS embedded team when the opportunity presented itself in 2017.”

Me: Excellent! So why did you decide to join the Pathway Team?

Shannon: “I was actually approached by Harley from the ICL team about joining Pathway Home. At the time I was working at a level II housing program called the Bridge

as a case manager and we shared a mutual client. Harley really pushed me to my resume to Barry and Mark and after some thought I decided to take the chance! Then in 2017 Barry and Alethea from ICL approached me about the MET embedded team opportunity and the rest is history.”

Me: How do you like working for the Pathway Team?

Shannon: “I love it! Everyone here seems here for the right reasons, there’s no smoke and mirrors and everyone is transparent. I love that we get to advocate for the less fortunate in the way we do and how person centered we are in an unorthodox way.”

Me: What do you find challenging working in Pathway?

Shannon: “keeping providers honest and accountable. I coordinate a lot with community providers, OMH, hospitals etc. and it’s always a challenge holding people accountable for their responsibilities regarding a member’s well-being.”

DID YOU KNOW?!?

Shannon is the mother of a 5y/o daughter and has BA in Psych and MA in Mental Health Counseling from Pace University. She’s hopefully taking her test to become a LMHC in June! (Good Luck!)

Strengths: “Humor, caring, good advocate and detail oriented”

Weakness: “Thoughtful to a fault and sometimes focuses on the problem over the solution first”

Outside of work: Shannon is training to be a professional roller skater as well as trying to start up a small business called Juice Plus! She also loves family time and self-care time.

Greatest Achievement: Being a mother and her daughter

Me: One lesson you’d give to new pathway members like myself?

Shannon: “Slow down, intentionally. Don’t jump to conclusions when speaking to members or providers. Listen with more than your ears!”

WHO INSPIRED YOU THIS MONTH?

Jessica Myers

I am inspired everyday by my coworker & counterpart Jessica Myers. In the past year, she has taken a leap into a trusted leadership role within our team. Jessica organized a movie trip last month that brought several of our clients together to experience socialization, warmth, and skill building. She continues to take high risk cases & ask questions when needed. I trust that when she is doing a job she will complete to the most thorough extent. She always keeps me on my toes for accountability. Jessica is not only a coworker, she has turned into one of my best friends! Thank you for your humor, liveliness & personality! – Alison H

Andrea Rivas

Is a very caring and warm case manager. She exudes this care and warmth on a daily basis, not only with clients but with the team as well. Andrea has dedicated her life to the care of others, both personally and professionally. Having been in the field of Social Work for many years, she has experienced a variety of systemic challenges and has met each of them to the best of her ability. Andrea works hard each and every day and is always willing to help out a fellow colleague. Andrea, we thank you for all you do and for always sharing your wisdom. We celebrate you. – Alethea G



Marlon Powell

PH ICL team presents an individual presentation during our Friday meetings. This last presentation was presented by Marlon Powell who discussed economic issues in the US as it relates to systems theory. Marlon discussed a range of topics including how monetary policy formed from previous wars to how health care evolved to develop the helping professions.

I was so inspired by this presentation I further discussed it with family and friends. Marlon presentation help me identify and realize how much more helping professionals matter. – Nyasia F



Lauren Acri

A team member who has inspired me is Pathway Home Community Access director Lauren Acri. I have known Lauren is since 2015 and have worked with her extensively at East Village Access PROS program, where I was a recipient of services. Serendipitously, Lauren accepted the position with Pathway Home just as I became a certified Peer Specialist. Her leadership qualities are a large part why I applied for the position. I feel that Lauren is an amazing individual whose work ethic and dedication is so pure, it's astounding to watch her in action and I'm thrilled to have her as my supervisor. – Edward O



CCNS

I admire my team, the dedication they have shown over these last two and a half years never wavers. The smiles you see in the picture is real and honest. They travel from Far Rockaway, to Brooklyn, to Long Island City sometimes in one day. They advocate for folks who would have no voice without them. They are assisting members to live in the community, to have a life outside of an institution and often times they face difficult situations. They have gone clothes shopping for someone who had no shoes to leave the hospital. They have provided food on a Friday night so someone wouldn't go hungry over the weekend. They are a team in the truest sense, helping each other, supporting each other and protecting each other when the situation arises. It is my pleasure to work alongside such dedicate individuals, they make my job such a pleasure. – Joan S





ICL team is now nationally
CPR certified!

Things to Do: March Events



PH CCNS Team Leader Joan Sass and Senior Mental Health Clinician Allison Hann will be presenting at the CBC Innovation Conference. A poster board will show how CCNS is impacting the Queens MH Systems by meeting individual needs beyond just behavioral health services. Through collaboration with all sectors in healthcare, they are improving outcomes and making real differences in people's lives.

WHEN:
MARCH 13TH, 2019
9:00AM - 4:00PM

WHERE:
NYU KIMMEL CENTER
60 WASHINGTON SQ. SOUTH
NEW YORK, NY 10012

Finalist

CBCs Pathway Home Program has been selected as a finalist of the **2019 Scattergood Innovation Award**, to be presented by The Thomas Scattergood Behavioral Health Foundation and the National Council for Behavioral Health. This is a major national award and a wonderful recognition of all the hard work done by the CBCs team

Please use the following link to access the public voting webpage (you can vote once per device):

[Vote Pathway Home Here](#)

