

PATHWAY HOME™

2019 Oct - Dec Newsletter | Volume # 7 | Issue # 16





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unplug

Anne Lamott has written about many topics including parenting, the healing process, and recovery (she is 32 years sober). In her [TED talk](#), viewed over 5 million times, she shares 12 wise truths she learned from life and writing. Number two

is “Almost everything will work again if you unplug it for a few minutes, including you,” reminding us to make time for those things that matter, the activities that provide us much needed nourishment.

Four years ago, PH was a small group that I could count on my two hands – no toes needed. Twice a week we would all meet around a conference room table, sharing advice and offering support when obstacles emerged. Orientation was one-on-one, collaboration across teams and agencies occurred often, and we had the good fortune of being able to fix self-care into the regular schedule. Fast forward to present, PH has grown to 14 teams with 100+ staff members, who have made a significant impact on the quality of life and well-being of over 2000 individuals served.

Burnout and self-care have become a topic commonly spoken and written about. [An analysis published in JAMA](#) links burnout to suboptimal quality and unsafe care. While clinical, wellness, and social goals are essential to the model, investing time addressing the elements that create productive and effective teams was always important to PH.

Together with a focused model, vigorous principles and inventiveness like using innovative technologies, addressing workforce development for those entrusted with the direct care is fundamental. Thinking about staff and the conditions they flourish in is crucial so that the staff are better positioned and primed for serving participants. If staff are not equipped or overworked, overwhelmed, or underappreciated, they are at risk of not performing at their best.

The growth of the program challenges us to reconsider how to maintain the culture of learning and support on a large scale. Over the years, the PH teams have identified new ideas – large and small – that invest in staff wellness and create a culture of support and professional learning.

During the fall, CBC has released the updated Pathway Home Manual, launched new trainings from the Pathway Home Training Institute (see page 6), and completed a half dozen

BARRY'S MESSAGE

orientations for the six new Pathway Home teams that operationalized in the fall. The “specialty” and MARC meetings continue with new content and increased participation. Here are some highlights:

Pathway Home Orientation: Pablo Picasso said, “Learn the rules like a pro, so you can break them like an artist.” To ensure staff understand the basic structure and are empowered to be creative, a thorough training process is offered. During the first couple of weeks, new staff complete a comprehensive two-day orientation where the PH model is taught. Shadowing is also used as training, as the best way to learn is experiential, seeing it in person versus theoretical, and facilitates staff camaraderie early on.

Specialty Meetings: PH supports a culture of learning through regular feedback and professional development. Trainings that will help advance clinical skills and knowledge with the behavioral health population are offered regularly. Specialty meetings bring together staff in similar roles, where either PH staff share an area of expertise or a guest trainer is brought in. The meetings are interactive and use experiential training techniques. (See page 7)

Member At-Risk Committee (MARC): CBC hosts a monthly meeting where PH staff can obtain support around challenging cases that have fallen through the cracks, difficulty accessing services, or individuals displaying high-risk behaviors. Ideas are crowdsourced from the CBC and PH community, so staff could better serve these individuals and alleviate challenges. By soliciting contributions and a collective effort, strategies are introduced, such as locating resources or ideas for creative interventions.

PH looks to hire staff who are passionate about PH’s mission to provide high quality care. A diverse staff with a variety of experience and professional backgrounds create a culture of creativity and “thinking outside the box.” Allowing staff to be creative to address needs, versus cookie cutter approaches increases potential. The model provides some structure with core activities, yet understands that too much structure can limit capabilities, not increase it. Whether it is through trainings, the manual, specialty meetings, or other initiatives, PH promotes *unplugging* through ongoing learning, inter-professional collaboration, and a community that spreads across agencies and across systems – ingredients that promote a healthy and thriving team.



Hot Press

OneCity Health + Pathway Home™

Last month, we introduced one of the NYC Health + Hospitals and OneCity Health PathwayHome™ team: The Jewish Board. This month met VNS, SUS & SDV

Visiting Nurse Service Launch with Harlem Hospital

In existence for over 33 years, VNSNY's Community Mental Health Service division began serving New Yorkers in 1986 and has expanded to more than 25 programs that provide comprehensive mental health services. Our most recent expansion began in October with the launch of the Pathway Home™ program providing services for Harlem Hospital psychiatric inpatient discharges. PH VNSNY team met with Harlem Hospital inpatient psychiatry department staff for introductions throughout October. The team has begun receiving referrals. We look forward to growing a successful collaboration to meet the needs of the population in Northern Manhattan.



Samaritan Daytop Village Launch with Lincoln Hospital

From Humble beginnings starting in Queens, NY Samaritan Daytop Village (SDV) has spent nearly 60 years dedicating itself to improving the quality of life for all New Yorkers. We have since expanded services throughout the New York



City area, Long Island, and upstate New York. In October, we continued to expand services with the official launch of our first Pathway Home™ team working with those in need during transition from Hospital to community. Through this newly One City Health Funded intervention, PH SDV partnered with Lincoln Hospital in identifying high utilizers of the ER and inpatient psych system as they try to keep participants rooted in the Bronx Community and hopefully stop the revolving door of hospitalization. We are excited for this ongoing collaboration and have begun enrolling participants.

Service for the UnderServed Launch with Metropolitan Hospital

SUS Pathway Home™ team is up and running! Our team, the clinicians, case managers, and peer are ready, willing, and able to begin assisting participants. During our start-up phase, the team has shadowed veteran Pathway Home™ teams to receive first-hand experience of how beneficial this program really is. The team have been spending their



time easing themselves into the hospital setting and engaging with the all unit staff and partners at Metropolitan Hospital to build successful relationships. As anticipated, referrals are starting to coming in, we look forward to collaborate with the hospital to promote, educate and enroll future participants. Thank you to the teams for letting us learn from you!

Hot Press

The Bridge



In partnership with CBC and Healthfirst, The Bridge officially launched a Pathway Home team in October 2019. The Bridge team will serve Healthfirst's Medicare population in the Bronx and Manhattan who are high utilizers of inpatient services. The team is being led by Amy Whelan, an experienced clinician who has previously led a community-based multidisciplinary team. The team is excited to be delivering much needed services while pioneering a new funding model that will ultimately help Pathway Home grow into a fully sustainable program in the future!

Check out our double features:

[Press release for Health First](#) and [Featured in Crains](#)

Bridging the Pathway to Home

Monisa Lane (SUS Pathway Home™ Embedded Team), Dr. Lukisha Homer (NYS Bronx Psychiatric Center) and Barry Granek (CBC) presented at the 2019 National Association for Case Manager Conference on Thursday, October 3rd at 9am on “Embedding Community-Based Case Management in a Hospital System.”

An article on the SUS Pathway Home™ BPC Embedded Team came out in Collaborative Case Management, ACMA's quarterly peer-reviewed publication- Issue 71 - October 2019. The article is titled *A Review of Effective Collaboration Between Hospital and Community-Based Teams: Partnership Between Pathway Home™ Hospital Embedded Team and Bronx Psychiatric Center.*

Click here to read more:



Pathway Home™ Training Institute

Emily's Training Corner: Why Come to Training?



Wow, is Pathway Home an amazing program! Since I started in August, I've seen such beautiful work from so many of you, and I could not be prouder or more grateful that I get to train you. Since I've done several trainings, and gotten to know many of you, I can sincerely say, thank you so much for all that you do! The level of dedication you all have to the participants in your program is something I've rarely seen, and I have worked in this field for nearly a decade.

So, why come to training? Aren't you already doing great work? Aren't you already busy, and shouldn't your time be spent serving your participants? The answer to that is—yes, you are already doing great work, and yes, you should be spending a lot of time serving your participants. However, training is a time for you.

Training should not just be viewed as something that you need to do in the beginning of your careers, or as remediation when you need to work on a skill that needs strengthening. The work that you do is really hard, and sometimes you as providers need to be refreshed and cared for yourselves. They say that “you can't pour from an empty cup.” Training is a way to refill this cup.

My main objective in training is two-fold. First, and most importantly, I want to inspire you and help you remember why you got into this field in the first place. That's why I make the trainings highly interactive. I don't want you to sit there being bored, so it's not just me reading off a PowerPoint.

This leads me to my second objective: to have you learn from each other. I do not claim to have all the answers. But I know that you are all experts in this work, and when I get a bunch of you together, you start to function as a “think-tank,” coming up with answers for each other. That's why I don't mind if we get off-topic sometimes or don't always perfectly adhere to my plan for the day. The most important thing is that we learn from each other.

Many of you know that I'm a person with lived-experience myself, and I can't tell you what a joy it is to be able to give back to the field by training the very types of mental health providers who once helped me. I look at it as repaying a debt of gratitude, and I take this duty to do this quite seriously.

I will be releasing the training calendar for January-March of 2020 in about a week or so, and I hope that you will take the time to have a look and see if you can take a few hours out of your busy schedule to come learn and refill your cup. I look forward to providing you an enriching experience, learning from you, and most importantly having you learn from each other.

I end my Person-Centered Engagement and De-Escalation training with this quote by St. Francis of Assisi: “all the darkness in the world cannot extinguish the light of a single candle.” You, to me are all candles that illuminate the darkness not just for our participants, but for the world. Thank you for allowing me the privilege of training you. For more information about training, or to send me your training ideas, email me at egrossman@cbcare.org.

Keep learning and growing,

Emily

Specialty Meetings: Be in the Know

National Case Management Week

“Hot off the press! October welcomed in National Case Management week as well as the Pathway Home™ Manual. PH Case Managers met with CBC Directors, Angelo Barberio and Juliana Steen to discuss core activities and components of the manual. They discussed the importance of appointments, accompaniment, and day of transition. Shop talk was followed by a training from Emily Grossman, Training Manager, who provided a preview of the “Coping Skills to Empower Your Participant’s Recovery” training. Case managers were able to learn and practice practical coping strategies to teach participants and understand the importance of providing participants with these skills to help them manage intense emotions. The full training will be held for PH Teams in the coming months. Big Thank You to all the Case Managers out there who provide such incredible work day in and day out!”



Digging Deep as a Peer

We discussed the article “Peer Specialists in the Mental Health Workforce: A Critical Assessment,” written by Darby Penney and Dr. Peter Stastny. The article discussed the original role of the peer specialist and how it has changed over time. The group discussed the role of the peer in depth, citing both the positives as well as the challenges of being a peer specialist. A wonderful discussion was had by all. Special thanks to Noah Phillips for finding this article and leading the discussion.



The Latest Pulse



The PH Nurses were accompanied by director, Angelo Barberio and QI Specialist, Jessica Frisco for their monthly meeting. Having an RN background, Jessica’s presence was a welcomed sight as the group discussed their role as nurse, collaboration with the rest of their team, and the topic of medication reconciliation. Jessica provided the group with some sample notes and a medication reconciliation worksheet to help guide their work. Thanks for having us RNs! See ya soon!”

The Clinician Hive

Like busy bees, the PH Clinicians met with a packed agenda that included reviewing the newly published Pathway Home™ Manual 3.0!

The group reviewed their newly updated job descriptions, as well as the policies for ‘day of discharge’ and ‘appointment’ attendance. CBC staff is diligently working to incorporate the valuable input from the clinicians in order to include it in the next manual revision. Additionally, the clinicians discussed some of the current challenges they are experiencing with other providers. The group brain stormed and discuss best practices to best assist other providers focus on the participants stated need (person-centered) to completing an HRA.



There's a First Time for Everything

Going through the hospital system for the first time can be frustrating and overwhelming for anyone. Going through it later on in life adds a whole new layer of complexities. This was the case for Nathan as his first psychiatric hospitalization occurred at the age of 65. Significant tensions with another tenant in his apartment building led to a physical altercation, which led to an arrest, and eventual transfer to South Beach Psychiatric Center who referred him to Pathway Home. Nathan had hoped to go live with his family, but to Nathan's disappointment his daughter had a full house of her own and could only have him stay there a few days. He had to take himself to Bellevue Men's Shelter. New to the mental health system, he did not understand the need for psychiatry appointments or why he was suddenly being prescribed medications. He was unclear and skeptical about how Pathway Home could assist him in his transition back home into the community and how having a multidisciplinary team catering to his transitional needs was important. A friendly and soft-spoken man, he struggled with advocating for himself in the shelter and following up with the housing process, yet he remained receptive to meeting with Ariane (PH Clinician).



Nathan ecstatically smiling on moving in day of his new apartment!

Ariane took him to psychiatric appointments, provided him with metro cards so he could travel to see his daughter and friends, shared meals with him, and even helped him activate his entitlements. All this in the effort of developing a trusting relationship with Nathan. Once he saw how Pathway Home could be helpful, Nathan became more open to psychoeducation and discussing the importance of continuing with psychiatric care --- not only to prevent future hospitalizations, but so Nathan could have someone in the community to ask for help if he ever needs it again. Ariane also worked collaboratively with Nathan to help him renew his expired green card and obtain current forms of IDs. Nine months later, Nathan's entitlements are fully activated, his green card has been renewed, he travels independently, and he has not missed a psychiatry appointment. Most importantly, he has a new apartment in Queens where he can begin to rebuild his life. In the spirit of

making his new apartment feel like home Ariane and the team were able to use step down funds in obtaining him a bed, cooking supplies, and other household items. As he prepares to graduate this month Nathans leaves us with some final words, **“Thank you so, so, so, so, so, so much. I will never forget you.”**

“Nathan was an absolute joy to work with, and it was amazing to see how much we accomplished thanks to Nathan's positive attitude, motivation, and dedication.”

- Ariane Ernst (ICL SMHC)

A Tale of Two Teams

Sandy is a 30-year-old woman who has struggled with maintaining stable housing for many years. With a history of over 30 hospitalizations, Sandy again found herself inpatient at Coney Island psychiatric unit after only 3 days since her last admission. Sandy was referred to Pathway Home (PH), giving her another opportunity to manager her mental health in the community.



The PH Jewish Board (TJB) team took time to explore the issues leading to her cycling in hospital to explore ways to address her issues.

Anne (TJB case manager) began with collaborating with the Coney Island Hospital team on developing an aftercare plan. As Sandy was homeless, the inpatient team worked diligently on locating housing. This wasn't always easy, at one-point Sandy saying, "I am not ready to be on my own, I am afraid that something would happen to me". Sandy struggled with anxiety, among other symptoms, and in meetings with Anne described "being tortured" emotionally. Anne spent time listening and supporting Sandy, assuring her that once in the community, she will still visit her and support her both with her social and emotional needs. In a breakthrough moment Sandy confided "OK, if you will be with me, I am willing to try being on my own then".

Initially wary of new services, Sandy appeared to respond to PH's conversational approach, stating frequently that she felt listened to and valued. This approach enabled her to develop a close relationship with Anne, to the extent that she requested that she go with her on housing tours. Anne agreed and went on several housing interviews. She coached her beforehand and processed with her after all 3 interviews. When she became anxious between the housing interviews, PH team supported Sandy with community outings and broke bread with her over meals at local restaurants. Their time spent together in the field, increased Sandy's trust in community programs and her willingness to accept help.

Sandy slowly built interviewing skills and was accepted to housing after a 5-month hospital stay. However, the residence was in another borough, and TJB would no longer be able to keep Sandy on their roster. Through collaboration with CBC, Sandy was able to access another PH team in her new neighborhood Harlem, the PH VNS team. Anxious to once again be introduced to a new staff, Sandy requested that TJB team complete several joint visits with VNS team, so the change can occur in a pace that Sandy was comfortable with. Vanessa, (VNS case manager) and Ofelia (VNS RN) met with Anne and Sandy completing several warm hand off meeting together.



Vanessa Tessier, VNS Case Manager

“With teamwork, the move for Sandy has been positive. Working together was instrumental to facilitate a successful transition. We are hopeful for Sandy’s future and proud of all her success so far in her new home.” - Vanessa

Excited about her new home, Sandy stated “I like this place better than Ward Island, it feels cozier. The other place felt like an institution or something”. She still experienced some challenges adjusting to the residence. Fortunately, she reached out to VNS team and talked about her past struggles, that have prevented her from maintaining stable housing. To ensure Sandy was able to quickly contact team, a temporary cell phone was provided to Sandy.

Not only was Sandy dealing with her first experience in stable housing in years, she was also experiencing a new neighborhood of Harlem. To help integrate, Vanessa spent time showing Sandy the neighborhood. They went shopping at Old Navy for clothes, as she had no weather appropriate clothes for the winter. For Sandy this was the first in many years that she had the opportunity to buy new clothes without having to worry about having enough money to eat. Anxious to even walk around the neighborhood, Vanessa encouraged Sandy to try walking by herself, starting with 1 block, and then taking short bus rides by herself, progressively increasing independence with encouragement.

At initial appointment, Sandy was initially turned away from clinic. They said that while she has an appointment, they overbooked and would need to reschedule. PH staff was present and able to advocate for her to be seen, explaining that she needed medication and couldn’t wait. It still took two hours to be seen by doctor, and though Sandy became irritable, having PH staff present was helpful to keep her focused and calm during session. After the appointment, Vanessa took Sandy out for a bite to eat for lunch. During the next psychiatric session, PH attended again for support, which was helpful as Sandy was trying to negotiate a medication change. It was also helpful when the medication didn’t arrive at residence, for PH staff to go to pharmacy and ensure that medication was delivered on time.

PH team was also able to help Sandy meet her Health Home care coordinator, who explained that she hasn’t been able to connect with Sandy in a long time as a result of homelessness. A face to face reintroduction occurred.

Together, TJB and VNS were able to engage and support Sandy from the beginning of her journey of finding a home continuing to help Sandy to work on her future goals. Despite the fear and anxiety, Sandy was able to overcome homelessness and the challenge of transitioning into her own apartment in a new neighborhood. She is now connected to providers and working towards independence.



Safe Haven to Home

In 1995, Hannah and her family immigrated from Egypt to the US and began building a life in Staten Island. There, Hannah worked for a city agency until her untimely dismissal. Upon getting divorced, which Hannah describes was due to her family's thoughts on how she behaved, Hannah became homeless. Despite frequently moving around, Hannah made sure to talk to her daughters weekly. Hannah was an optimist but found herself unable to move past her feelings around her ex-husband and his family. It was not long before those thoughts started interfering with her ability to care for herself. She frequently discussed the need to call the CIA, believing her ex-husband and his mother had played a role in her being fired, ruminating about how evil they were.

For nearly 6 years, Hannah lived in shelters and was often hospitalized. Having spent time at two state psychiatric centers, Hannah was connected to Pathway Home™. She noted her main goal was to update her green card, without which would be a barrier in securing stable housing and benefits. David (SUS Case Manager) found out that her immigration

documentation was expired and needed to be renewed. David worked with Hannah to gather the necessary documentation, complete the application, and update her green card.

With all her documents updated, the team worked to ensure Hannah was taking care of herself. The team connected her to White Plains Road Clinic for behavioral health services. Hannah regularly attended her appointments and started utilizing Wellth™ as a method to remember to take her medication. With Hannah engaged in treatment and actively using Wellth™, she successfully maintained taking her medication and attending to her health needs. Additionally, Toni (SUS RN), linked Hannah to Brightpoint Medical Clinic.

SUPPORTING YOU...

**ALL THE WAY
THROUGH**

Hannah overcame many obstacles on her journey to wellness, particularly her homelessness and thoughts about her family. Throughout her work with Pathway Home™ team, Hannah remained optimistic and grateful for the support. She is working with Transitional Living Residence, with the support of her daughters, to find long term stable housing. At the time of her graduation from Pathway Home™, Hannah had several housing interviews set up and looking forward to securing a place to call home.

“It’s Showtime!”



Ben enjoying a cup of coffee in the community

Born in the Bronx and raised in Rockland County, Ben had never lived alone. Despite being so close to his family, Ben and his mother had recently developed a tumultuous relationship. Their disagreements would quickly escalate and bring out the worst in one another. As Ben’s stay in the hospital came to a close, the discussion regarding his living arrangements became more pertinent. After multiple meetings and conversations between Ben, his family, and the treatment team the group thought it best for Ben to move into a supportive residence. Despite living outside of the city for so long, Ben was determined to find his place when he moved back to New York City. The desire to build a life that promoted health, healing, and happiness was on the top of Ben’s list of goals.

Working with Nyasia, PH Peer Specialist, Ben shared his desire to find employment, develop a routine, and increase his ability to build healthy relationships. Initially, Ben voiced his desire to become an actor but was unsure how to make that a reality when he was mandated to attend a day program five days a week. As the pair worked together,

the need to help Ben improve his self-esteem became increasingly more important. He seemed to doubt his ability to build healthy relationships and struggled to find appropriate things to talk about. Nyasia and Ben began meeting at Starbucks to work on strengthening his social skills by practicing talking points and how to engage. Not only would this enable him to learn better methods of interacting with his peers and providers, but it also gave him the hope and confidence that he could develop social and romantic relationships.

As Ben continued to work on building a life of his own in the city, Nyasia intermittently attempted to discuss his relationship with his mother. Ben noted that he regularly spoke to his mother, often visited her, and shared that she would give him money on occasion. Things were looking up for Ben. He realized a lifelong goal, when he secured an acting job, appearing in several TV series as a background actor. Ben successfully built a stable healthy life for himself in New York City. When it was time for Ben and Nyasia to end their work together, Nyasia happily shared that it was not goodbye, she would see Ben while watching her favorite TV show.



My Letter to Pathway Home

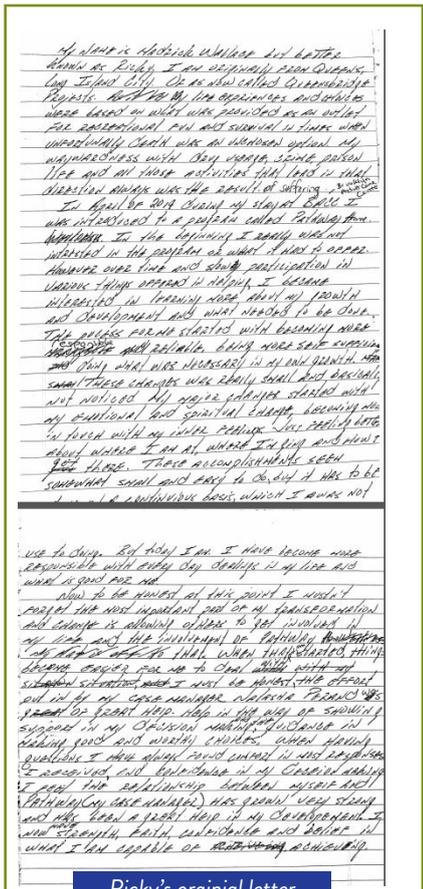
Madrick celebrated his progress and successes while in the Pathway Home program, graduating in October. He wrote a moving letter, giving it to team clinician Natasha on the last visit.

“My name is Madrick Wallace but better known as Ricky. I am originally from Queens Long Island City or as now called Queensbridge Projects. My life experiences and choices were based on what was provided as an outlet for recreational fun and survival in times when unfortunately death was an unchosen option. My waywardness with drug usage, crime, prison life and all those activities that lead in that direction always was the result of suffering.

In April of 2019 during my stay at Brooklyn Adult Care Center I was introduced to a program called Pathway Home. In the beginning, I really was not interested in the program or what it had to offer. However, overtime and slowly participating in various things that helped me, I became interested in learning more about my growth and development and what needed to be done. The process for me started with becoming more responsible, reliable and being more self-sufficient in doing what was necessary in my own growth. These changes were really small and basically not noticed. My major change started with my emotional and spiritual change and becoming more in touch with my inner feelings. Just feeling better about where I am at, where I am going, and how to get there. These accomplishments seemed somewhat small and easy to do, but it had to be done on a continuous basis, which I was not used to doing,

but today I am. I have become more responsible with every day dealings in my life and what is good for me.

Now to be honest, at this point I must not forget the most important part of my transformation and change was allowing others to get involved in my life and the involvement of Pathway Home. When that program started, things became easier for me to deal with. I must be honest, the effort put in by my case manager Natasha Persaud was of great help. Help in the way of showing support in my decision making and the guidance in making good and worthy choices. When having questions, I have always found comfort in most responses I received, and confidence in my decision making. I feel the relationship between myself and Pathway case manager has grown very strong and has been a great help in my development. I now have strength, faith, confidence and belief in what I am capable of achieving.”



Ricky's original letter

Note to Ricky



Working with Ricky has been eventful. Ricky has demonstrated that it is never too late to make a difference in one's life. Ricky was capable of setting new goals for himself and achieving them. Ricky looked at success from many different angles whether big or small, it was always laughter and positivity. Ricky was always so curious to why I was so supportive and always ready to lend a hand. He was very receptive to my advice and he was not sure why. Ricky had difficulty taking suggestions from others especially his family members. Ricky made his family aware of what he was working on and what he was accomplishing and they were in shock. Ricky's sister shared with him

that she has to meet this person that has helped her brother make changes in his life. Ricky had me meet his sister, whom is also one of his number one natural supports. He often referred to us as "teammates" and "buddies" in conversation. I'm grateful she had the opportunity to make a lasting impact on member's life. Ricky will continue to thrive in his future endeavors. - WellLife Clinician Natasha Persaud



Edward, Peer Specialist on the Community Access team, reflects on his time spent with one of our PH participants, Henry. The photo seen above was taken of the East River during one of their many CitiBike excursions around Battery Park. Edward writes,

*Henry typically presents as quiet and thoughtful. Though this may be true, Henry is a recovery **rock star**. Every week he comes to the table with something new, recently reporting ‘..oh yeah, I volunteered three times through New York Cares last week’ or ‘I applied for college starting in January.’ About six weeks ago, Henry applied to Fountain House and was accepted. We met for lunch the other day so I could see the facility. He casually mentioned ‘...Because I know baking so well and really enjoy it, my unit at Fountain House asked me to be lead baker.’ Henry now has a routine and reports to be loving it. It has just been astounding watching Henry take flight.*

Trip to Museum of Moving Image



CCNS participants viewing artwork at MOMI

CCNS PH team took 7 participants to the Museum of Moving Image. The Museum of Moving Image is dedicated to art, history, technique & technology of moving image in all its forms. Participants engaged with interactive exhibitions, such as doing movie voice overs, picking soundtracks for movie scenes, and puppeteering at the museum’s Jim Henson Exhibit. The participants also learned about the production & history of moving image (film, television, & more) and viewed the museum’s unique collections on a guided Behind the Scenes Tour. The participants interacted with each other, sharing stories of their favorite movies & television shows growing up while immersed in all the museum had to offer. Even more, the museum is free every Friday from 4pm-8pm, making it a great place for participants, who otherwise might not be able to afford museum admittance, to come back with friends & family.



Muppet created by the CCNS participants.



Jamming Out

Community Access PH team had it's very first graduate in October. Richard was a special participant who brought his joy of music to the team. Richard and Edward (Peer Specialist) often went to the guitar center together to record music and try new instruments. As one of the first participants, the idea of engagement by jamming on guitars was outside the traditional models of treatment the team professionals had been accustomed to prior to joining Pathway Home™. The team continued jamming with Richard right up until his graduation party that was held for him in the community room of his residence on his graduation day. Richard and the PH team were joined by his other supports for the party whom Richard invited himself. Richard and Edward performed a few numbers together and Richard recorded the whole thing on cassette (his preferred format!). All in all, it's very apparent how Richard has grown with the team over the last months. He now does a lot of things independently, like going to the store by himself or with his girlfriend. This was a goal to reach as Richard lives with symptoms that affect navigation. "I am going to miss Richard very much" Edward said "I hope we were able to bring as much light and music into Richard's life as he brought to ours".



L to R: Richard receiving graduation certificate from PH PS Edward



CCNS Pathway Home Team™ coordinated an event for participants' to experience The Christmas Spectacular Show with the "Rockettes".

Participants enjoyed popcorn and refreshments while watching the spectacular story about the meaning of Christmas. In the spirit of Christmas, participants sat together and shared stories and good conversation.

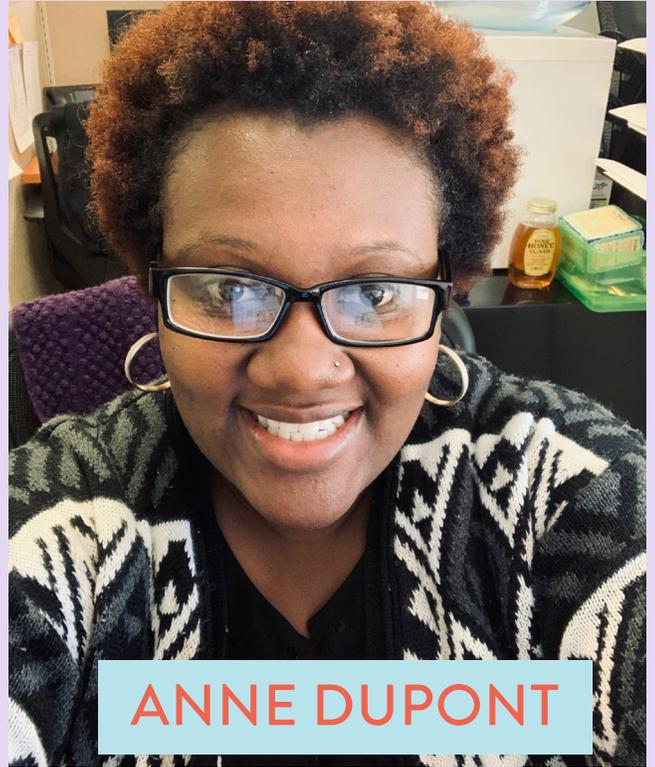


Joshua A was calm and in tune with event, conversing with his peers about the show. Carmen stated "I was happy to attend and experience the show." Carmen was eager to attend as she missed the museum event due to a medical issue. Carmen stated that this was her first time seeing the "Rockettes" and that it was a great experience. Namgyal shared "I was excited about seeing the show." Namgyal assisted with coordinating the group in the theatre traffic to get to and from the seats. Namgyal stated that despite her Mother flying out later, she had to see the show before saying bye to her Mom. Namgyal was able to make it back home in time to say bye to her Mother.

BOOTS ON THE GROUND

By Angelo Barberio

Trick or Treat...give me something good to READ... Happy Halloween everyone, this October I got a chance to sit down with Anne Dupont, SCM with the new OCH Jewish Board Pathway Home Team working with individuals transitioning from Coney Island Hospital back into the community. We talked all things Pathway Home as well as life outside of work.



ANNE DUPONT

DID YOU KNOW!?

Anne has 2 children, she's originally from BK but lived in Nebraska for 4 years. She has a BA in Criminal Justice and a MA in business!

Strengths: "Persistent & Resilient, I got my MA while I was pregnant and working full time in Nebraska"

Weakness: "I'm my biggest enemy. I'm a tough critic of myself."

Outside of work: Anne loves spending times with her kids, retail therapy, farmers markets, going to church and helping people!

Greatest Achievement: "Outside of my kids, finishing school while I was working, pregnant and in the process of trying to move back to NY"

Personal PH Motto: "Be Empathetic over sympathetic"

Me: So, Anne what were you doing before Pathway Home™? And How did you hear about Pathway Home™?

Anne: "Well I did a number of different things. I worked in care coordination, I volunteered with meals on wheels, I worked in the NY CJA (criminal Justice Agency) in Queens helping people make their court appts, and I even worked as a corrections officer in Nebraska for several years! I heard about PH from Mark Graham at a Care Coordination training he was presenting at. He showed Alison's (my TL) testimonial and during lunch I approached Mark and eventually passed my resume along."

Me: That's so Interesting! So why did you decide to join the Pathway Team™?

Anne: "When I saw Alison's testimonial, I thought to myself "I never heard of a program that can actually take folks rock climbing before!" When I worked in Corrections I worked in the psychiatric unit and felt the treatment there was not right. I knew then that I wanted to be part of something that actually helped people and didn't punish them as a form of rehabilitation. So, I went back to school for my MA in business in the hopes of

one day opening my own place to help folks. My path led me back to NY to be closer to my family and eventually led me here to PH."

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

Anne: "I love it, I came from a 55-person caseload in Care Coordination so finding something like this was a relief. I love the team-based approach and love my TL! Everyone is treated like an equal here."

Me: What do you find challenging about the work?

Anne: "Taking a step back and not trying to fix participants problems all in one day. One of our 1st referrals was re-hospitalized after D/C and I took it really hard at first but after taking a minute it turned out to be the right call. Sometimes I'm just a little too hard on myself."

Me: One lesson you'd give to new Pathway Home™ team leaders?

Anne: "Teamwork, lean on your team, take input and feedback so you can work together. No one is here to outshine anyone else."