



Summary of Standards

Care Coordination Agency

Pathways Community HUB (PCH) is an evidence-based, nationally certified model developed and licensed by the Pathways Community HUB Institute® (PCHI). To assure fidelity to the model and support communities in implementing all components of this comprehensive community-based care coordination model, PCHI® licenses the model content to organizations committed to achieving / maintaining the standards required for certification.

Omaha Pathways Community HUB (Omaha PCH or HUB) has started the certification process and is committed to achieving success with all standards required for certification. The Care Coordination Agencies (CCAs) selected to join us in launching the HUB will be partners in implementing this model here in Omaha, and ensuring we are effectively serving our community, achieving our intended outcomes, and working toward certification.

Summary of key components of the model:

- 1. Home-based / Community Based Care Coordination:** This model is an intensive, relationship-based model of care coordination. The expectation is that a minimum of 75% of visits occur in a participant's home or community-setting. If visits are not conducted at home, the CHW must document the reason(s).
- 2. Standard forms and data collection:** The PCHI® Model includes 3 standard forms completed by CHWs and their supervisors - the demographic form, visit form, and progress form. In addition, there is a standardized form for each of the 21 Pathways. The HUB may adopt additional standard forms or screening tools as we co-design implementation of this work with our CCAs, CHWs and other partners. In the early phase of implementation this documentation will be completed via electronic or paper forms and submitted through secure methods to the HUB (see #11 for additional info on future processes).
- 3. Outcomes-based tracking and payment:** Each Pathway has a defined outcome, and the Pathway is successfully closed based on achieving those outcomes. At least 50% of the payment to the CCAs is based on successful completion of the Pathways.
- 4. Evidence-based Learning Modules:** PCHI® has developed over 60 evidence-based learning modules that are designed to support the CHW and participant's shared work to reduce identified risk factors. These modules are intended for a CHW to review in person with a participant and take 5 - 10 minutes each.

Summary of key standards:

In addition to ensuring the model components above are met, there are additional standards required for certification including (but not limited to) the following:

- 5. Training requirements:** All staff from the HUB or CCAs must meet training requirements from PCHI®. The HUB will pay for and coordinate any needed training.
 - PCHI® Model Training* - this is an approximate 20-hour training on implementing the PCHI® Model and is required within 30 days of hire.
 - CHW/ Supervisor Core Competency Training* - PCHI® requires all CHWs and their supervisors to demonstrate they have completed training that meets a set of core competencies. This can be achieved through PCHI training, other training, or a combination of both.
 - CLAS (Culturally and Linguistically Appropriate Services) Standards Training* - All HUB and CCA staff will need to complete training at least every 2 years, delivered by the HUB or the CCA.

6. **Community Advisory Council (CAC):** The CAC is a structure to ensure community members are meaningfully engaged and empowered to guide and advise the strategies of the HUB. Key functions of the CAC will be to advise implementation of the HUB, support progress toward achieving standards and certification, and oversee the Quality Improvement plans (see #8 below). The CAC will also help elevate and disseminate data, key findings, and opportunities to broader community stakeholders. It will be important to have representation from the CCAs / CHWs on the CAC.
7. **Transparent / Accountable Practices:** It is important that the HUB operates in a neutral and equitable manner and ensures that all practices are based on the services, competencies, and capacity of the CCAs, and the needs of the participants. We will establish clear policies and procedures for how referrals are distributed to CCAs and ensure there is no conflict of interest. In addition, CCAs are required to remain neutral in their referrals for participants and ensure participants understand all service options and are empowered to choose where and how to receive services.
8. **Quality Standards and Improvement Process:** The HUB will regularly evaluate its services as well as those provided by the CCAs. A detailed plan and outcomes are required, which will be developed with the CCAs, CHWs, HUB staff, and CAC. Additionally, CCAs should be aware of several quality standards:
 - a. All CHWs are required to be at least 0.5 FTE dedicated to HUB work.
 - b. A quarterly quality benchmark report must be submitted to PCHI® which includes comprehensive data provided by the CCA / CHW to the HUB.
 - c. Various expectations are in place about timeliness of documentation, caseload reviews, etc. The HUB and CCA will work together to ensure these expectations are met and workflows are effective. For example, CHWs should complete visit documentation within 2 business days, and supervisors should review and sign-off within 5 business days.
9. **CHW Support and Supervision:** All CHWs should be supported and supervised by a registered nurse, licensed clinical social worker or another health, social, behavioral, or oral health professional that understands and values the role of CHWs. Experienced CHWs may function in a supervisory role when part of a care team. CHW supervisors must be culturally competent, attend CHW trainings, and be proficient in supervising CHWs. Both PCHI® and the State of Nebraska are developing CHW Supervisor training in recognition of the importance of this role for a successful CHW workforce. Also, although not required by PCHI®, we intend to develop, with the CHWs, an ongoing support and development plan to ensure CHWs have access to resources, training, and education that supports their professional and personal success.

Additional Requirements: CCAs should be aware of the following additional requirements in working with the HUB:

10. **Business Associate Agreement (BAA) / Sub-license agreement:** A CCA will complete a BAA, a type of contract, with the HUB. This agreement gives the CCA access to the PCHI® licensed content. Additionally, due to the private and sensitive nature of the information collected and reported by CHWs it is important to protect this information for several reasons: 1) to ensure confidence and trust with our participants, 2) to follow regulatory requirements with the healthcare providers and payers (HIPAA), 3) to make referrals and to monitor and measure our work, 4) for evaluation and quality improvement processes, and 5) for billing and reimbursement of the work. The BAA will outline key security measures needed to protect this information and the HUB will work with the CCA to develop any needed practices and policies.
11. **Technology adoption:** At some point during implementation of this work, the HUB will adopt a technology platform to assist with workflow, documentation, and billing. This technology platform is a “care coordination” tool and needs to be an approved technology by PCHI®. The CCAs will need to use this technology and ensure all relevant staff are trained. The cost of the technology and associated training will be covered by the HUB.
12. **Policies and Procedures:** Background checks are required for all HUB and CCA staff working with the model. As part of the certification process, CCAs may be asked to submit copies of other relevant organizational policies (e.g., adoption of CLAS standards, non-discrimination policies, human resources policies).

