

## **PCH Certification Standard 1 Pathways Community HUB Entity**

The Pathways Community HUB Entity has a structure in place to operate an accountable community-based care coordination network to implement the Pathways Community HUB Institute® Model to fidelity.

**Description:** The Pathways Community HUB (PCH) is a legal entity that has the capacity to enter into agreements or contracts, assume obligations, incur and pay debts, sue and be sued, and to be held responsible for its actions. The organization must have adequate infrastructure to track and document the delivery of services to those at risk and must have the ability to document engagement and Pathways, process payments to care coordination agencies (CCA), and contract with and invoice payers. The PCH Director and staff must have diverse competencies to ensure the success and sustainability of the PCH.

The PCH office and staff are located within the community and/or region it serves, and there can only be one Pathways Community HUB in a service area. The PCH must operate in a clearly defined geographic area made up of neighboring communities or counties and cannot be statewide. The PCH must operate as a neutral convener and not employ community health workers that provide PCH Network services.

PCHI requires Pathways Community HUBs to submit documentation of eligibility to serve as a PCH as part of the certification process. This information is submitted by the PCH to PCHI and is maintained in each PCH's certification file. This file should be kept up to date. Prior to the certification documentation upload deadline, the PCH should review all documents on file and provide any additional updates as needed.

**Aligns with CLAS Standards 1, 2, 3, and 4.**

### **Review Items**

The PCH Certification File includes the following previously submitted documents. Please ensure that the information is up to date:

- PCH Certification Applications (Initial Certification Application and Certification Review Application, if applicable)
- PCH Certification Agreement
- PCH Sublicensing Agreements
- PCH Annual Certification Attestation(s)
- PCH Attendance Records for PCHI Network meetings
- Current PCH Certification Quality Improvement Plan Agreement

Job descriptions and resumes for PCH Director and PCH staff.

Organizational Chart for PCH and its network, and if applicable, sponsoring organization which shows where the PCH fits into the organization and reporting structure.

Organization's most recent IRS Form 990 to confirm nonprofit status and compliance with IRS reporting requirements.

PCHI Eligibility and Compliance Acknowledgement indicating that the PCH continues to meet the PCH eligibility requirements and understands that it is responsible for complying with the various privacy, security, and antitrust regulations that pertain to its operations.

PCH Certification Workbook is used to collect information on the demographics of the service area (Tab 1.1, PCH Service Area), the number of participants enrolled in each defined location in your service area in the past 12 months, as well as demographics on the PCH governing body (Tab 1.3, Board Demographic Tool) and PCH staff (Tab 1.2, Staff Demographic Tool). Please complete all fields for each individual, and defined service area.

Most recently completed PCH fiscal year financial statement of activities (i.e., annual budget with income and expenses) and current fiscal year-to-date income and expenses and annual budget. Complete the PCH Certification Workbook, Tab 1.4, PCH Income and Expenses for the most recently completed fiscal year:

- Total engagement fee and Pathways completion OBU income from all sources (i.e., grants, contracts, charitable contributions, etc.)
- Percentage of total income the number above represents (total income for engagement fees and Pathways completion divided by total income)

PCH Case Statement demonstrating the value provided to the community by funding the PCH and the PCH's role in addressing health equity (this can be from a funding request). Also include, if available, annual report, studies on effectiveness, return on investment, and program evaluation reports.

## **PCH Certification Standard 2 Pathways Community HUB Network**

The Pathways Community HUB coordinates a network of community-based care coordination agencies (CCA) serving at-risk participants and has written contracts with CCAs.

**Description:** To promote positive health outcomes and cost savings leading to health equity, the Pathways Community HUB (PCH) connects those who are at risk to a community health worker and ensures the participant receives coordinated medical, behavioral health, oral health, social, environmental, and educational services. PCH Certification requires a minimum of two contracted care coordination agencies (CCA).

**Aligns with CLAS Standards 1, 3, 5, 6, 7, 8, 9, 11, and 12.**

### **Review Items**

The PCH Certification Workbook is used to collect information about care coordination agencies and staff, including their race and ethnicity. Please complete all fields for Tab 2.1, CCA Overview and Tab 2.2, CCA Staff Demographic Tool. All fields should be completed for each organization in Tab 2.1 and each individual in Tab 2.2.

Provide baseline and updated measures on key outcomes tracked by the Pathways Community HUB in the PCH Certification Workbook, Tab 2.3, Key Outcomes. If tracking key outcomes on the participant level, then also include a screenshot of a Progress Form with key outcomes displayed.

Provide contracts with all CCAs that are using the PCHI Model. Contracts must be signed, dated, and use PCHI's outcome-based payment methodology. Please provide the entire contract for review, but you may redact any confidential information as needed. Contracts must have language that clearly states the expectation that all CCA staff will know and follow policies and procedures that are outlined in the PCH Operations Manual.

Signed nondisclosure agreements (NDAs) with other partners who have access to PCHI Model content (e.g., Community Advisory Council members, evaluators, funders, etc.)

Documentation that CHWs are supported by effective and culturally competent supervisors working within the professional scope of their license. Provide job descriptions on CCA letterhead and resumes for each CHW supervisor.

## **PCH Certification Standard 3**

### **Pathways Community HUB Institute® Model Care Coordination**

The Pathways Community HUB and its network of contracted care coordination agency partners use the Pathways Community HUB Institute Model to fidelity.

**Description:** The Pathways Community HUB Institute Model (PCHI Model) includes the PCHI Data Model, Standard Pathways, Demographic Form, Visit Form, and Quality Benchmark Report. Each element of the Model must be used by the PCH and the PCH Network to fidelity. Implementation of the Model is fundamental to improving the evidence-based effectiveness of the PCH and its ongoing development and improvement. The PCH must clearly identify additional data fields captured by the PCH Network and share with PCHI as part of the Certification review process.

A PCHI Standard Pathway is opened for each risk identified for a participant. This includes risks that the participant may not be ready or interested in addressing. Each Pathway, when successfully completed, represents a specific individually modifiable risk factor that has been identified and eliminated. Even when Pathways are not successfully closed (finished incomplete), they can provide valuable, data-supported insight into unmet community needs.

Some modifiable risks can only be addressed through learning and behavior change. PCHI has developed Learning Modules used in combination with the Learning Pathway to encourage and support behavior change. All Learning Modules must be available to CHWs providing community-based care coordination through the PCHI Model. CHWs must have sufficient training and support to be able to use any of the Learning Modules with participants.

If the PCH uses additional curriculum, then it must describe the process used to approve evidence-based learning materials used by CHWs. Each Learning Module should be tied to a specific medical, social, or behavioral health risk factor that can be mitigated and addressed with learning and motivational interventions\*. Learning materials used outside of the PCHI standard curriculum for Learning Modules must represent a similar level of effort, time, commitment, and expertise in delivery towards a measurable outcome:

- Represents a volume of learning and educational material that will take 10-15 minutes for the CHW to provide to the participant, using motivational interviewing techniques, and not simply providing a handout.
- The learning process includes educational, and behavior change information shared in an Ask-Tell-Ask interaction using open-ended questions.
- Content is evidence-based and focused on addressing a specific, well-defined, modifiable medical, social, behavioral or safety risk.
- The participant is engaged, and the CHW can document the participant's response to the learning information provided.

\*(<https://www.sciencedirect.com/science/article/pii/S0091743520301420?via%3Dihub>)

**Aligns with CLAS Standards 1, 2, 11, and 12.**

**Review Items**

The PCHI Model requires that a Standard Pathway is opened when a risk factor is identified. The PCH must provide confirmation that it can support all current Standard Pathways and Learning Modules. The PCH must confirm that CHWs have been trained on all Pathways and Learning Modules, and to open a Pathway whenever a risk is identified. Paper documentation, screenshots, and the Quality Benchmark Report (table 4) will be required to verify this.

If the PCH is using additional educational materials, then the PCH will provide a document detailing this information, the process of approving the material, and the rationale for its use.

Confirmation that CHWs are using PCHI Model data collection forms through paper process or screenshots:

- Demographic Form
- Visit Form
- Progress Form

If the PCH needs to collect participant information beyond what is collected in the PCHI Model, then the PCH must provide a list of such fields.

PCH is using a PCHI Certified Technology Vendor or the PCHI Participant Tracking Toolkit on the current PCHI Model. A new PCH cannot be certified on the 1.0 version of the Model.

PCH has a minimum of one approved PCHI Model Care Coordination Trainer after one year of operation.

Signed contracts with all funders supporting the PCH and PCH Network, including contracts based on the PCHI Model Outcome-Based Contract Template. PCHI Model requires that at least two contracts use the PCHI Model Outcome-Based Contract Template tying fifty percent (50%) of payments to completed Pathways.

## PCH Certification Standard 4 Pathways Community HUB Network Operations

The Pathways Community HUB is responsible for monitoring and improving the quality of community-based care coordination services provided to those who are at risk.

<p><b>Description:</b> To ensure that network operations align in a transparent and accountable manner, the PCH must establish and maintain a written Operations Manual outlining PCH Network policies and procedures. The PCH Operations Manual must clearly outline the expectations for the PCH, CCAs, and all PCH Network staff. The PCH Operations Manual must be reviewed at least annually, and updates provided to the complete PCH Network. Contracts between the PCH and CCAs must reflect that PCH Network policies and procedures are required to be followed.</p>
<p><b>Aligns with CLAS Standards 1, 6, 7, 8, 9, 11, 13, 14, and 15.</b></p>
<p style="text-align: center;"><b>Review Items</b></p>
<p>Contracts between the PCH and CCAs have language that clearly states the expectation that all CCA staff will know and follow policies and procedures relating to them that are outlined in the PCH Operations Manual.</p>
<p>Written PCH Operations Manual contains, at a minimum, the following policies and procedures:</p>
<p>1. The PCH's organizational policies, procedures, and practices reflect the adoption of the National Culturally and Linguistically Appropriate Services (CLAS) Standards. Applicable CLAS Standards should be referenced in each policy and practice.</p>
<p>2. Referral policy and procedures that clearly defines the referral process:</p> <ul style="list-style-type: none"> <li>• Initial referral from a referral partner to the PCH, and from a CHW to the PCH,</li> <li>• PCH's referral to a CCA,</li> <li>• CCA's update on referral and engagement status to the PCH, and</li> <li>• PCH's update on referral and engagement status to the referral partner.</li> </ul> <p>The policy should define the number and types of attempts required to contact the community member, as well as the expected timeframes for each step of the referral process.</p>
<p>3. Enrollment and Duplication of Service policy and procedures that includes the enrollment process for new participants. The policy should outline how duplication is identified, documented, and eliminated.</p>
<p>4. Supervision policy and procedures that address the supervisor to CHW ratio, minimum of monthly caseload reviews, supervisor review and sign off process within five business days from the home visit date, and action steps for urgent issues.</p>

<p>5. CHW Caseload policy and procedures that includes minimum and maximum caseload expectations for full and part-time CHWs. The Policy should address caseload correction processes at the CCA and PCH level. The PCHI Model requires that CHWs be at least 0.5 FTE.</p>
<p>6. The Home Visit policy and procedures should state that home visits are expected 75% of the time and should occur at least monthly. The policy should address how attempted visits and contact between visits are captured by the CHW. PCHI Model requires that CHWs complete home visit documentation within two business days of the visit date. Background checks are required for all CHWs and any additional CCA staff that provide home or community visits.</p>
<p>7. Emergency Situation Response policy and procedures provide guidance on how the PCH and PCH Network will respond in emergency situations (natural disasters, pandemics, etc.). The policy should clearly define the actions and expectations of the PCH and CCAs, including training for CHWs.</p>
<p>8. Training policy and procedures that provides training expectations, including:</p> <ul style="list-style-type: none"> <li>• All PCH Network staff must complete PCHI Model Care Coordination training.</li> <li>• PCH Director must complete PCHI's Organizational Culturally and Linguistically Appropriate Services (CLAS) training.</li> <li>• PCH Network staff must receive HIPAA, privacy and security training, and CLAS training annually.</li> <li>• CHWs and supervisors must receive PCHI Model Care Coordination training, Mandatory Reporting training, and Home Visit Safety training before engaging participants.</li> <li>• CHWs must complete all required components of comprehensive training using the PCHI Model CHW Core Training Competencies as a guide.</li> </ul>
<p>9. Quality Improvement policy and procedures including:</p> <ul style="list-style-type: none"> <li>• Overview of the quality improvement (QI) tools or methods adopted by your PCH (examples include, but are not limited to, PDSA (Plan, Do, Study, Act), Six Sigma, Lean, etc.)</li> <li>• A named owner and a description of their role in the management of the quality improvement process.</li> <li>• Description of how QI reviews are initiated by the PCH.</li> <li>• Description of how the PCH uses QI findings to improve the quality of community-based care coordination services.</li> <li>• Description of how operational changes based on QI findings are communicated to the PCH Network.</li> </ul>

## PCH Certification Standard 5 Training

The Pathways Community HUB Network staff have comprehensive training, education and support.

**Description:** The Pathways Community HUB Institute Model of community-based care coordination focuses on improving health, advancing health equity, and improving quality. Education, training and support for community health workers (CHW), CHW supervisors, and PCH staff is vital to the provision of effective, equitable, understandable, and respectful quality services that lead to improved outcomes.

PCHI has developed a Training Log (Tab 5.1) in the PCH Certification Workbook which is the monitoring and oversight tool that records the specific training classes/courses that are needed, when and by whom, and provides a way to identify training gaps.

**Aligns with CLAS Standards 1, 2, 4, and 15.**

### Review Items

PCH has clearly defined and written training expectations for the PCH Network as outlined in the PCH Operations Manual and contracts between the PCH and CCAs.

Completed Tab 5.1, Training Log of the PCH Certification Workbook for PCH Network staff, including:

1. All PCH Network staff must complete PCHI Model training. Community health workers are required to complete PCHI Model training prior to engaging with participants. PCHI Model training can only be given by an approved PCHI Model Care Coordination Trainer. Refresher training should be provided as updates to the Model are released.
2. HIPAA, privacy and security training upon hire and annually. Community health workers are required to complete HIPAA training prior to engaging with participants.
3. Culturally and Linguistically Appropriate Services (CLAS) training:
  - PCHI Organizational CLAS Training is required for PCH Directors. Other PCH staff are encouraged to take the training.
  - CHWs and supervisors must complete initial CHW/Supervisor CLAS training ensuring that each CHW and supervisor have completed all required components using the PCHI Culturally and Linguistically Appropriate Services (CLAS) Core Training Competencies for CHWs/Supervisors as a guide. Local CLAS training may be substituted in place of PCHI's CHW/Supervisor CLAS training, if your PCH/PA can show that the PCHI CLAS Core Training Competencies for CHWs/Supervisors are fully met.
  - Annual CLAS training should be outlined in your PCH Operations Manual.



4. Community Health Worker training ensuring that each CHW has completed all required components of comprehensive training using the PCHI Model CHW Core Training Competencies as a guide. Recommended as soon as possible, at least within 12 months from date of hire.
5. CHWs are required to complete mandatory reporting training prior to engaging with participants.
6. CHWs are required to complete home visit safety training prior to engaging with participants.

## PCH Certification Standard 6 Community Advisory Council

The Pathways Community HUB establishes, maintains, and is advised by a Community Advisory Council.

**Description:** To ensure that a Pathways Community HUB understands and meets the needs of those who are at risk in their service area, the PCH leverages existing community resources and seeks to add value to the community. Local leaders, therefore, need to be meaningfully engaged and empowered to guide and advise the strategies of the PCH. Community Advisory Council (CAC) members should represent key community stakeholders including community members, past PCH participants, care coordination agency staff (CHWs and supervisors), referral partners, payers, direct service providers, and local government.

The CAC should work closely with the PCH staff to identify and address issues identified in the community through analysis of the PCH data (i.e., gaps, resources, etc.) and play a pivotal role in quality improvement of community-based care coordination and alignment of community resources.

The PCH is committed to improving the health of the community and is responsible to the community. Therefore, the PCH regularly communicates and reports its strategies, progress, and challenges to its funders, policymakers, CCA members, participants, and the community at large in partnership with the Community Advisory Council.

**Aligns with CLAS Standards 1, 2, 3, 13, and 15.**

### Review Items

The PCH Certification Workbook, Tab 6 is used to collect demographic information about Community Advisory Council members. Please complete all fields for each member.

The Community Advisory Council Narrative Template is used to collect information regarding the experience of each member. Please upload a completed narrative for each CAC member.

The CAC Members Roles and Responsibilities Template is used to describe the expectations and duties of the Community Advisory Council. Additionally, the Community Advisory Council Charter Guide can be used to inform the development of the CAC roles and responsibilities (though not required). Please complete the CAC Members Roles and Responsibilities Template for your PCH's Community Advisory Council.

Meeting minutes for the past 12 months, including:

- Name of assigned minute taker, date and length of meeting, meeting attendance.
- Summary of each topic/agenda item discussed, including review of recent PCH data.
- Items requiring a vote and the result. If another decision-making method was used, then please describe.

Reports to the larger community over the past 12 months. This could include press releases, web pages, newsletters, annual reports, presentations, etc.

## **PCH Certification Standard 7 Quality Improvement**

The Pathways Community HUB Institute Model is based on continuous quality improvement. The Pathways Community HUB is committed to quality improvement and has a written quality improvement policy and procedures.

**Description:** The Pathways Community HUB (PCH) is a data-driven organization with a defined quality improvement (QI) approach. Quality improvement is integrated into ongoing operations and is used to ensure fidelity to the PCHI Model, advance work towards health equity, and to improve participant outcomes.

As part of the PCH Certification process, a Quality Improvement Plan Agreement is developed for all PCHs to focus on operational areas that could be improved upon.

Quality Improvement and the PCHI Model:

- Evidence-based and QI focused: The Model requires validation of impact and course correction to improve quality.
- Model fidelity: Research has shown that the Model provides a meaningful and measurable return on investment when followed to fidelity. This Standard validates that the PCH is following the PCHI Model.
- Equity: The Model is designed to empower communities to advance health equity. This Standard validates that the PCH is supporting populations identified as at-risk and under-resourced.

**Aligns with CLAS Standards 1, 10, 11, and 14.**

### **Review Items**

Pathways Community HUBs that have previously gone through a PCHI Certification Review need to upload their most recent PCHI Certification Quality Improvement Plan Agreement (QIP), with updates describing progress made on each item. The QIP is developed by the PCH and PCHI after each certification review to identify areas to improve the PCH's compliance with PCHI Model Certification Standards.

Copy of the Pathways Community HUB's written Quality Improvement policy and procedures that describes how the PCH addresses continuous quality improvement in their PCH Network, including:

- Overview of the quality improvement (QI) tools or methods adopted by your PCH (examples include, but are not limited to, PDSA (Plan, Do, Study, Act), Six Sigma, Lean, etc.)
- A named owner and a description of their role in the management of the quality improvement process.
- Description of how QI reviews are initiated by the PCH.
- Description of how the PCH uses QI findings to improve the quality of community-based care coordination services.
- Description of how operational changes based on QI findings are communicated to the PCH Network.

Quality improvement reviews for the past 12 months, including:

- Referral and engagement of participants
- Pathways closure rates and strategies to improve
- Reviews of the Quality Benchmark Report

PCHI will confirm that Quality Benchmark Reports have been submitted quarterly to PCHI over the past 12 months. PCH should upload the most recent QBR to their Certification Folder.

## CLAS/PCHI Standard CROSSWALK

CLAS Standard		PCHI Standard	
1.	Provide effective, equitable, understandable, and respectful quality care and services that are responsive to diverse cultural health beliefs and practices, preferred languages, health literacy, and other communication needs.	1	Pathways Community HUB
		2	PCH Network
		3	PCHI Model Care Coordination
		4	PCH Network Operations
2.	Advance and sustain organizational governance and leadership that promotes CLAS and health equity through policy, practices, and allocated resources.	1	Pathways Community HUB
		3	PCHI Model Care Coordination
		5	Training
		6	Community Advisory Council (CAC)
3.	Recruit, promote, and support a culturally and linguistically diverse governance, leadership, and workforce that are responsive to the population in the service area.	1	Pathways Community HUB
		2	PCH Network
		6	Community Advisory Council (CAC)

4.	Educate and train governance, leadership, and workforce in culturally and linguistically appropriate policies and practices on an ongoing basis.	5	Training
		1	Pathways Community HUB
5.	Offer language assistance to individuals who have limited English proficiency and/or other communication needs, at no cost to them, to facilitate timely access to all health care and services.	2	PCH Network
6.	Inform all individuals of the availability of language assistance services clearly and in their preferred language, verbally and in writing.	2	PCH Network
		4	PCH Network Operations
7.	Ensure the competence of individuals providing language assistance, recognizing that the use of untrained individuals and/or minors as interpreters should be avoided.	2	PCH Network
		4	PCH Network Operations
8.	Provide easy-to-understand print and multimedia materials and signage in the languages commonly used by the populations in the service area.	2	PCH Network
		4	PCH Network Operations
9.	Establish culturally and linguistically appropriate goals, policies, and management accountability, and infuse them throughout the organization's planning and operations.	2	PCH Network
		4	PCH Network Operations
10.	Conduct ongoing assessments of the organization's CLAS-related activities and integrate CLAS-related measures into measurement and continuous quality improvement activities.	7	Quality Improvement

11.	Collect and maintain accurate and reliable demographic data to monitor and evaluate the impact of CLAS on health equity and outcomes and to inform service delivery.	2	PCH Network
		3	PCHI Model Care Coordination
		4	PCH Network Operations
		7	Quality Improvement
12.	Conduct regular assessments of community health assets and needs and use the results to plan and implement services that respond to the cultural and linguistic diversity of populations in the service area.	2	PCH Network
		3	PCHI Model Care Coordination
13.	Partner with the community to design, implement, and evaluate policies, practices, and services to ensure cultural and linguistic appropriateness.	4	PCH Network Operations
		6	Community Advisory Council (CAC)
14.	Create conflict and grievance resolution processes that are culturally and linguistically appropriate to identify, prevent, and resolve conflicts or complaints.	4	PCH Network Operations
		7	Quality Improvement
15.	Communicate the organization's progress in implementing and sustaining CLAS to all stakeholders, constituents, and the general public.	6	Community Advisory Council (CAC)
		4	PCH Network Operations
		5	Training