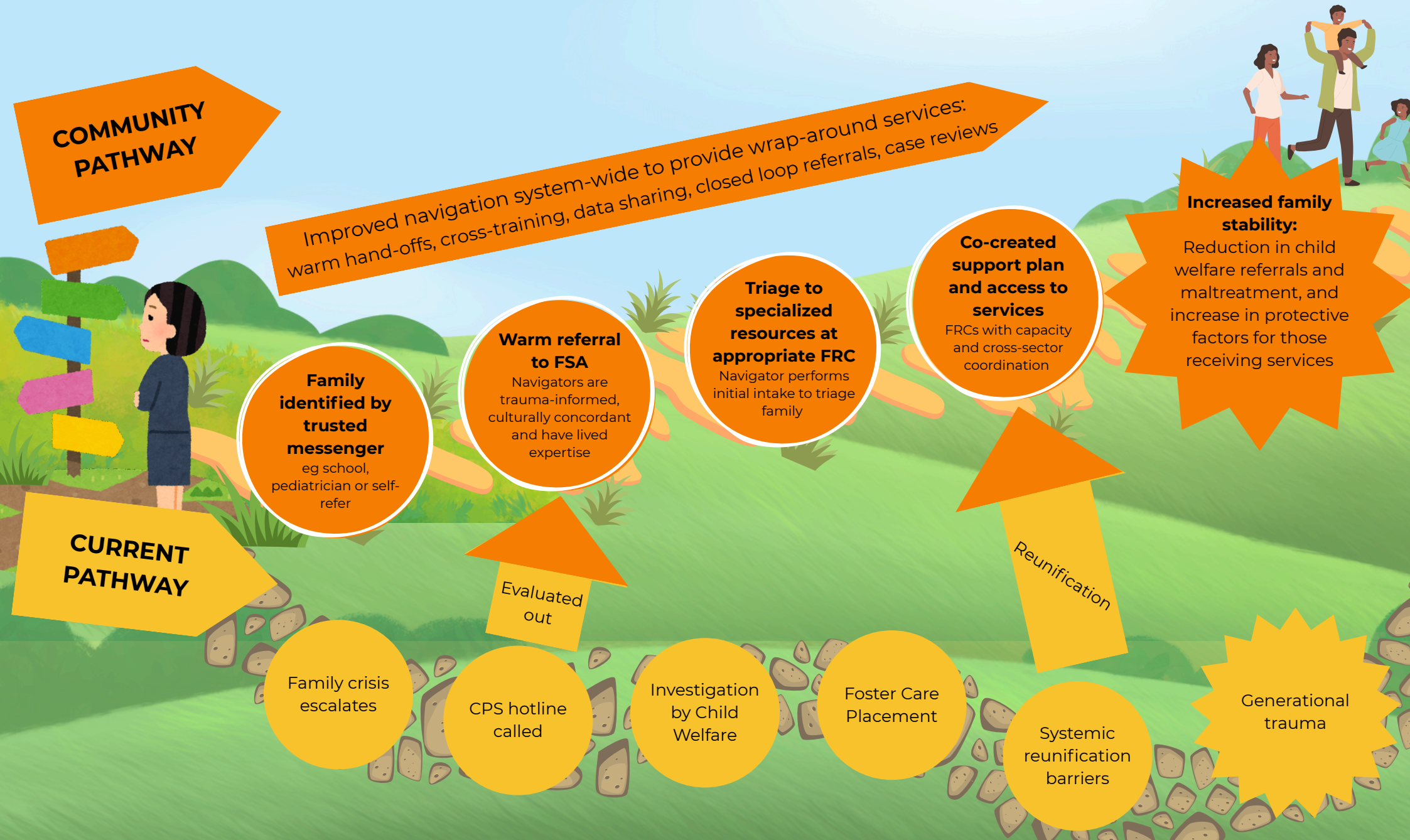


BUILDING THE COMMUNITY PATHWAY

A family in crisis in San Francisco - comparing a reactive response in the system to early support via the community pathway



COMMUNITY PATHWAY - AN EXAMPLE

Maria is a mother of two young children - a newborn and a four-year-old. At her baby's three-month check-up, she screens positive for postpartum depression. When the pediatrician explores further, Maria shares a history of substance use, past experiences with domestic violence and ongoing struggles with severe depression. She also discloses that the baby's father is currently incarcerated and scheduled to be released in two months, adding to her stress and uncertainty. Although she has no prior involvement with child welfare, these risk factors highlight the urgent need for trauma-informed psychiatric support and community support for her social needs to ensure both her wellbeing and the healthy development of her children.

Due to coordination among service providers, Maria is trustful and can easily access the things she needs with minimal extra stress

COMMUNITY PATHWAY

Maria's pediatrician brings the clinic's on-site FSA community health worker into the exam room. This is a fellow mother who overcame similar struggles, and shares with Maria that help is available in the community. She explains the process and gets Maria's consent to share a basic family intake form with FSA.

The FSA Navigator shares the basic family intake form with the FSA liaison and triage team. The team determines that Maria is eligible for Enhanced Care Management. There is an open spot at Homeless Prenatal Program. The FSA Navigator calls Maria and does a warm handoff to the ECM provider at FSA Network Provider.

In the first meeting with Maria's ECM provider they co-develop goals based on the protective factors and ECM requirements. The provider helps Maria develop a plan including: medication support for depression and substance use, a parenting support group, safety planning for her partner's return and preschool enrollment for her child.

Maria's partner is released and the family experiences domestic violence. However, because of the trust built with her provider, Maria discloses it and her providers help her in enacting her safety plan. When it becomes clear she will need a housing referral her care manager contacts her with that resource.

Increased family stability:

- Maria and family exit the DV situation and secure safe housing.
- Maria is getting support for mental health and substance use.
- Maria's four year old is enrolled in preschool and screened for developmental milestones.
- Maria is putting positive parenting practices into action.

Maria's pediatrician refers her to psychiatric support for her postpartum depression and brings in a CHW to assist with social needs

Triage Meeting

Case Plan Development and service provision

Referrals and Care Coordination

CURRENT PATHWAY

Family crisis escalates

Evaluated out

CPS hotline called

Investigation by Child Welfare

Foster Care Placement

Reunification

Systemic reunification barriers

Generational trauma:

Increase risk of future mental and physical health challenges

