Title

Creating and evaluating service navigation networks for the militaryconnected population

Abstract

Background

Military-connected individuals consistently report challenges navigating benefits and services, and frequently experience multiple, interrelated needs that span domains (e.g., employment, housing, legal). Collaboration between clinical and social service providers is necessary, yet the health and human services landscape is fragmented and often lacks transparency and accountability.

Objective

The D'Aniello Institute for Veterans and Military Families at Syracuse University developed AmericaServes (AS), an adapted collective impact model for creating and evaluating coordinated networks of organizations that address health and human service needs of the military-connected population. AS strengthens how service providers work together by implementing a referral-based system, managed by a coordination center with human navigators utilizing a shared technology platform.

Methods

Stakeholders across domains are brought together through a series of planning sessions. A coordination center is selected through competitive application process. Organizations receive platform training and adopt a common process to screen clients for health-related social needs and obtain consent for referrals. Network performance measures are defined as process outcomes in accordance with systems theory: timeliness, appropriateness, and scalability. These outcomes are assessed using data from the technology platform.

Results

To date, the AS model has operated in 18 regions and collectively include over 1,000 organizations. Networks have assisted over 43,000 clients with 106,000 requests. Data across networks in 2019 (prior to COVID-19) shows: 1) individuals matched to a provider within 1.07 days (median); 2) coordination centers accurately selected a provider on the first attempt for 94% of requests; 3) networks operational in 2018 and 2019 managed 20% more requests in 2019.

Conclusion

Evaluation shows AS is an effective model of care coordination for military-connected clients as measured by indicators of timeliness, appropriateness, and scalability. Research in progress is matching AS clients to VA patient data to measure effects of AS exposure on health outcomes, benefits utilization, and costs.