

CASE MANAGEMENT CARE COORDINATOR JOB ANNOUNCEMENT

Santa Cruz Community Health (SCCH) began as a women's health collective in 1974 with the mission to improve the health of our patients and the community and advocate the feminist goals of social, political, and economic equality. Now, nearly 50 years later, we serve that same mission as a nonprofit Federally Qualified Health Center operating three separate sites: the Santa Cruz Women's Health Center in downtown Santa Cruz serving women and children; the East Cliff Family Health Center in Live Oak, serving everyone; and the Santa Cruz Mountain Health Center providing easier access to care for our patients in the San Lorenzo Valley.

SCCH has a diverse patient population and an engaging and friendly work environment. Our caring and committed staff works as a team to fulfill our mission so that all our patients have access to comprehensive, quality health care.

In December 2022, the East Cliff Family Health Center changed locations in Live Oak and moved into a brandnew space offering an integrated, state-of-the-art health and housing campus. SCCH will continue to provide medical, behavioral health, and specialty care with a focus on pediatrics. The campus addresses a triple goal of increasing access to healthcare, growing affordable housing, and creating economic opportunity. Partners in the project are Santa Cruz Community Health, Dientes Community Dental Care, and MidPen Housing.

POSITION SUMMARY:

Under direct supervision of the Lead Case Manager and/or Case Management Director, the Case Management Care Coordinator (CMCC) works with the Case Management Team in a variety of ways. The CMCC assists all patients in need of Case Management Services by acting as a patient and program advocate and navigator. The CMCC assists in developing CM work flows and supports with scheduling.

Further, the CMCC addresses barriers to CM care by providing advocacy and coordination of appointments and referrals, preparing charts for patient visits, assisting the CM providers with workflows, and serving as a strong and flexible member of a health care team. The CMCC demonstrates exceptional critical thinking, clinical, patient and provider relations, organizational, and time management skills.

Classification: Full-time, Hourly, Non-Exempt Location: Varies; Clinic/Remote Reports to: Lead Case Manager and/or Case Management Director Hours: 8:00AM-5:00PM; Flexible

CORE JOB RESPONSIBILITES:

ESSENTIAL FUNCTIONS INCLUDE BUT ARE NOT LIMITED TO:

Patient Care

- Serves as a navigator and advocate for patients to access case management services
- May conduct outreach to potential CM patients as directed
- Monitors and scrubs Case Managers schedules and caseloads on a daily basis
- Facilitates patient education about SCCH's integrated model



- Serves as a point of contact for Case Management patients and corresponds on various platforms on behalf of Case Managers as needed to support resource linkage
- Confirms eligibility and submits documentation of Case Management patients for ECM benefits at least monthly
- Regularly interfaces with CCAH regarding ECM patients and shares data and documents including TARS via their secure portals and other programs such as Activate Care
- Sends notices to the CM team via the EHR regarding their contacts with ECM patients, mid-month and as needed
- Participates in grant related activities as directed by supervisor including meetings, data collection, and data entry
- Assist the Case Managers with administrative duties including corresponding with patients via secure messaging platform as needed
- Liaison between the CM team and other operations staff, may attend some operations meetings on behalf of the CM team as directed

Team-based care

- Trains Medical Assistants and Patient Services Representatives on CM policies, workflows, and scheduling protocols
- Manages agenda, meeting minutes and participates in BH Team Huddles and Case Management Meetings
- Uses data effectively to assist Case Management leadership in meeting productivity targets
- Involvement in organizational planning committees as assigned
- Coordinates with external healthcare systems to ensure continuity of care
- Supports referrals to other agencies as needed by sending paperwork and following up
- Partners with case managers for high-risk patient care plans and scheduling, including management of patients with multiple co-morbidities or high risk for readmission to a hospital
- Demonstrates clear verbal and written communication amongst care team members
- Evaluates utilization of resources and develops new forms, workflows, and procedures as necessary
- Coordinates clinical supervision and meetings and blocks provider schedule accordingly

Expertise

- Demonstrates knowledge of Social Determinants of Health and Motivational Interviewing
- Demonstrates knowledge and use of clinic policies and procedures as well as applicable federal and state rules and regulations
- Demonstrates ability to effectively use Electronic Health Records system (EHR), including regular monitoring of telephone encounters and actions with a prompt response time
- Demonstrates knowledge of local resources and supports linkages
- Completes other projects as assigned

Customer Service

- Provides patient-centered customer service at all times
- Demonstrates the ability to anticipate patients' needs and responds in a timely and respectful manner
- Demonstrates ownership, initiative, attention to detail, and follow-through
- Approaches problem-solving through a patient centered lens
- Advocates for care that best serves the patient
- Addresses or redirects customer complaints/problems in a timely manner



Communication Skills

- Oral and written communication is clear, concise, accurate, positive and respectful.
- Demonstrates comprehension of oral and written questions, instructions, and information
- Responds to oral and written communications in a timely and appropriate manner
- Written communication is well-organized, legible, concise, neat, and in proper grammatical form
- Checks work related email and mailbox throughout each scheduled workday

Teamwork and Interpersonal Skills

- Interactions with others are characterized by courtesy, diplomacy, honesty, empathy and confidence
- Effective in offering support and assistance to patients and colleagues
- Efficient in obtaining and coordinating information from external service providers and community partners
- Demonstrates a positive attitude, flexibility, and the ability to develop effective interpersonal relationships including conflict resolution skills
- Collaboratively assists team members with administrative and patient care related tasks

Judgment and Problem Solving

- Uses critical thinking to analyze situations, makes timely and valid decisions, and takes appropriate
 actions
- Demonstrates good judgment and common sense in making decisions
- Resolves issues independently and seeks assistance as needed

Reliability

- Completes assigned duties and responsibilities in an accurate, timely and efficient manner
- Arrives to work on time and maintains consistent attendance
- Follows instructions and appropriate procedures
- Maintains patient confidentiality as required by HIPAA.

QUALIFICATIONS:

MINIMUM QUALIFICATIONS

- At least one year of experience working in a healthcare setting
- Desire to serve the community clinic population with IBH services
- Experience and/or interest in social work, public health, community advocacy, case management
- Bilingual in Spanish/English

PREFERRED QUALIFICATIONS

- Bachelor's Degree in Health and Human Services, Community Studies, Health Sciences, or related field
- Experienced in Motivational Interviewing
- Skilled in Microsoft Office (Outlook, Word, PowerPoint, Excel)
- Experienced with Electronic Health Record systems



WORK CONDITIONS:

Working conditions described here are representative of those that must be met by an employee to successfully perform the essential functions of this job. Reasonable accommodation may be made to enable qualified individuals with disabilities to perform the essential functions. Variations in conditions may occur under certain circumstances.

SALARY & BENEFITS:

This is a full-time, hourly, non-exempt position with a pay range of \$26.00 - \$30.90 per hour DOE. Competitive compensation & benefits package are available to staff working at least 20 hours per week. Paid time off and paid holidays accrue from date of hire. Employer subsidized group health, dental, vision and life insurance plans the first of the month after 30 days of employment. Automatic 2% enrollment in an Employer sponsored 401K plan with a 2% retirement match.

APPLICATION PROCESS:

To apply, download our employment application on our <u>Careers page</u>. Submit application and current resume with letter of interest to Human Resources. No phone inquiries, please.

SANTA CRUZ COMMUNITY HEALTH IS AN EQUAL OPPORTUNITY EMPLOYER (W/M/V/D).