



ENHANCED CASE MANAGEMENT (ECM) NURSE JOB ANNOUNCEMENT

Santa Cruz Community Health (SCCH) is a multi-site, Federally Qualified Health Center (FQHC) serving Santa Cruz County residents. 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, 50 years later, we serve that same mission at our three clinic sites: the Santa Cruz Women's Health Center in downtown Santa Cruz serving women and children; the Live Oak Health Center serving everyone; and the Santa Cruz Mountain Health Center providing appropriate and expanded access to care for our patients in the San Lorenzo Valley.

Driven by our commitment to health care as a human right, SCCH is a leading non-profit provider offering comprehensive health services to our patients, regardless of their ability to pay. We have been recognized in the community as a leader in delivering high-quality, innovative care, and we are active in local, state, and national advocacy work that empowers our patients and community to be healthy, happy, and successful.

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 quality, whole-person health care.

POSITION SUMMARY:

The Enhanced Case Management (ECM) Nurse is a vital member of Santa Cruz Community Health's integrated delivery model that takes a whole-person, team-based approach to serving patients. Case Managers undertake a collaborative process of assessment, treatment-planning, facilitation, care coordination, evaluation, and advocacy for options and services to meet an individual's and family's comprehensive health needs.

Reports to: Case Management Director

Location: Hybrid; On site, In Community, and Remote

Classification: Full-Time, Salary, Exempt

Pay Range: \$79,040 - \$98,072 per year, DOE

Hours: Varies (one evening shift)

BENEFITS:

Competitive compensation and 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.

QUALIFICATIONS



MINIMUM QUALIFICATIONS

- LVN from an accredited school or another nursing degree (such as RN)
- Experience in case management
- Excellent communication, interpersonal and problem-solving skills
- Ability to work independently and collaboratively in a primary care setting
- Ability to complete all documentation in accordance with organizational requirements
- Strong Computer Literacy in Microsoft Office and Excel
- Reliable transportation and ability to travel within a 50-mile radius for meetings, trainings and patient appointments (mileage reimbursement is provided – your own vehicle)

PREFERRED QUALIFICATIONS

- Case management/patient navigation experience within a community-based health center
- Bilingual in English/Spanish
- Knowledge of evidence-based practices including: Motivational Interviewing, Harm Reduction and Trauma-Informed Care
- Ability to work in a fast-paced environment with quickly shifting priorities
- Experience with Electronic Health Records

CORE JOB RESPONSIBILITIES:

- Supports the entire ECM team with the varied complex medical needs of our ECM patient population
- Follows up with all patients open to CM who have recently been hospitalized. Collaborates with hospital and SNF staff on discharge planning. Advocates for in-home services such as visiting nurses, PT, etc.
- Manages a small panel of assigned patients who have complex medical needs and meet criteria for ECM (Enhanced Case Management) services. Please see below for a description of patient populations served. These are subject to change as rules and regulations change.
- Helps Central California Alliance for Health (CAAH) members with complex needs get assistance by coordinating and helping to manage their care for a designated period of time
- Pulls outside records, checks the health information exchange (HIE), provides updates to medical care team/PCP
- Acts as the primary point of contact for other medical specialists who are involved in the ECM patient's care
- May attend specialist and medical appointments as needed
- Utilizes screening tools and evidence-based practices to support patient-centered care and mutual goal development.
- Designs and implements care plans that improve the patient experience, improve health outcomes, and reduce barriers to care. Provides relevant input into care plans for other ECM patients who may not be assigned to the Nurse ECM provider.
- Provides risk assessment and crisis intervention services as needed.
- Consults and collaborates with members of the patient's care team, including developing shared treatment plans, goals and interventions.
- Consults and coordinates with community systems to facilitate linkage, manage referrals and advocate for patient needs, with a focus on supporting identified treatment goals



- Maintains patient and program documentation according to HIPAA and SCCH standards and regulations.
- Utilizes Health Information Technology such as SCHIO, the CCAH portal, and Unite Us to better serve patients and improve communication with outside agencies.
- Uses critical thinking and common sense to analyze situations, make timely and valid decisions, and take appropriate actions. Must be prepared to adapt to rapidly shifting priorities with grace.
- Expands the interdisciplinary team to include patients, their identified support system, health care providers and community-based professionals with whom the client interacts (e.g. nurses, substance use counselors, behavioral health providers, pharmacy, etc.)
- Works within scope of practice and maintains a high level of ethical standards regarding confidentiality, dual-relationships and professional stature.
- Practices cultural humility in working with diverse patient populations.
- Attends community meetings as assigned and represents the organization professionally and capably.

The Nurse ECM Case Manager will support with all our identified case management populations (subject to change):

- Adults over 18 and youth, patients with multiple chronic health conditions, behavioral health diagnoses, barriers to care, limited access to resources, unstable housing and other complex factors.
- Children and youth with a California Children's Services (CCS) diagnosis; children and youth with Child Welfare (CWS) involvement; children and youth with housing instability
- Adults, children and youth with a substance use disorder either active or in recovery, motivation toward treatment.
- Adults and youth in their perinatal period or pregnancy who meet other ECM criteria (e.g. housing instability, SUD, etc.)

Customer Service

- Provides patient-centered customer service at all times
- Demonstrates the ability to anticipate patients' needs and deliver services and respond to patients in a timely, accurate, courteous, respectful and friendly manner
- Demonstrates ownership, initiative, attention to detail, and follow-through
- Approaches problem-solving by focusing on patients first
- Advocates for care that best serves the patient
- Addresses 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 rapidly, thoroughly, and accurately
- Response to oral and written questions, instructions, and information is timely and appropriate
- Written communication is well-organized, legible, concise, neat, and in proper grammatical form
- Checks work related email and mailbox on a daily basis

Teamwork and Interpersonal Skills

- Dealings with others are characterized by fairness, courtesy, diplomacy, honesty, firmness, empathy and confidence



- Effective in offering support and assistance to others, in obtaining information from others, and in supplying information to others
- Demonstrates a positive attitude, flexibility and ability to develop effective relationships by helping others accomplish tasks and using collaboration and conflict resolution skills

Judgment and Problem Solving

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

Reliability

- Completes assigned duties & 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.

APPLICATION PROCESS:

To apply, download our employment application on our [Careers page](#). Submit application and current resume with letter of interest Human Resources. No phone inquiries, please.

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