

Michael E. DeBakey Veterans Affairs Medical Center
Houston, Texas

FUNCTIONAL STATEMENT
Medical Care Line
RN CASE MANAGER (CM): NURSE II

I. ADMINISTRATIVE QUALIFICATION STANDARDS

CITIZENSHIP	RN LICENSURE	EDUCATION	RN EXPERIENCE	OTHER
United States	Current, full, active, and unrestricted in any US State, Commonwealth, Territory, or the District of Columbia	Bachelor of Science in Nursing (BSN)	2 to 3 years	(Upon Appointment only) (1) Satisfactory physical examination as determined by the Employee Health Unit (2) Verbal and written English language proficiency
		Associate Degree in Nursing or Diploma in Nursing and a bachelor's degree in a field related to nursing	2 to 3 years	
		Master of Science in Nursing (MSN) or Master's in a field related to nursing with BSN or bachelor's in a field related to nursing	1 to 2 years	
		Master of Science in Nursing (MSN) from Bridge Program (a BSN is not issued or required)	1 to 2 years	
		Doctoral degree in nursing or related field	None	

All schools of nursing must be accredited by the appropriate State agency, and accredited by either the National League for Nursing Accrediting Commission (NLNAC) or the Commission on Collegiate Nursing Education (CCNE) at the time the program was completed.

Reviewed: 10/2018

II. GENERAL DESCRIPTION OF ASSIGNED DUTIES

The registered nurse provides care and counseling of persons or in the promotion and maintenance of health and prevention of illness and injury based upon the nursing process which includes systematic data gathering, assessment, appropriate nursing judgment, and evaluation of human responses to actual or potential health problems through such services as case finding, health teaching, health counseling; provision of care supportive to or restorative of life and well-being; and executing medical regimens including administering medications and treatments prescribed by a licensed or otherwise legally authorized provider. (Texas Board of Nursing) The nurse's primary commitment is to the patient, whether an individual, family, group, or community. (ANA Code of Ethics for Nurses)

The RN Case Manager is organizationally responsible to the Nurse Executive or designee and serves as direct staff support to surgical management, section chiefs, and all others in planning, designing, integrating, implementing, modifying, and administering a Quality Assessment and Improvement Program that evaluates and seeks to improve the quality of clinical care and/or the appropriateness and timeliness of surgical services provided. He/she provides support to key staff regarding the compilation and analysis of clinical and administrative data, quality of care assessments, risk management and utilization of resources throughout the care line. The incumbent is responsible for demonstrating clinical expertise and providing support to the RN Case Management in the Medical Care Line in the development and implementation of systems to improve the quality of patient care and to ensure compliance with internal and external requirements and standards. Additionally, the RN Case Manager is responsible for using her/his clinical knowledge and judgment in reviewing medical records to evaluate the quality and appropriateness of care provided and providing meaningful analysis of data for the purpose of improving the clinical management of patients. She/he is responsible for recommending action to improve care.

MEDVAMC is a major interdisciplinary teaching facility with service lines serving medical, surgical, and neurological inpatients and outpatients, with a Level III Emergency Department, and multiple community-based outpatient clinics (CBOC). There is a large outpatient psychiatric population, with admissions for medical co-morbidities.

Scope of Nurse II:

Demonstrates leadership in delivering and improving holistic care through collaborative strategies with others (VA

Handbook 5005, Part II, Appendix G6). The Nurse II registered nurse is a proficient nurse who demonstrates proficiency in decision-making and using the nursing process for complex situations that effect performance outcomes at the point of care. Practice is enhanced through development of collegial relationships. This nurse demonstrates collaboration by using the group process to solve problems. The focus is on leadership in strategically planning long-term goals for the microsystem (unit, team, or workgroup) that impacts operations or resources. The proficient nurse demonstrates critical thinking with efficiency and accuracy in assessing and managing situations.

The RN Case Manager of the Medical Care Line will practice in accordance with the scope of practice of the Board of

Nurse Examiners and the Nurse Practice Act; the rules and regulations; policies; procedures; and guidelines of MEDVAMC, practice within the nine dimensions outlined in the Nurse Qualification Standards and which are specific to the Grade and Level, and practice patient safety according to the National Patient Safety Goals. The RN Case Manager will interact and collaborate with the MEDVAMC Quality Management, and individuals in various health care disciplines, and work together to solve problems affecting quality of care involved, performance measurement, data collection, documentation, and seeking solutions to problems quality improvement.

III. FUNCTIONS OF ASSIGNED DUTIES: PRACTICE QUALIFICATION STANDARDS

DIMENSION OF NURSING PRACTICE: PRACTICE
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PRACTICE: Applies the nursing process to systems or processes at the unit/team/work group level to improve care. Demonstrates leadership by involving others in improving care.

Performance Standards

1. The nurse is responsible and accountable for individual nursing practice and determines the appropriate delegation of tasks consistent with the nurse's obligation to provide optimal care (ANA Code of Ethics for Nurses).
2. Displays leadership in identifying and evaluating issues in order to improve clinical programs..
3. Is recognized and consulted by the interdisciplinary team to share their unique knowledge and clinical expertise.
4. Makes decisions based on professional standards and scope of practice (i.e. Nurse Practice Act, ANA standards).
5. Provides support for Utilization Management Program, that evaluate the appropriateness of care provided; and applies clinical and administrative knowledge in identification, analysis, and resolution of issues pertaining to the quality of care as needed.
6. Position-specific Competency Checklist is completed annually and is rated competent in all measured areas.
7. Collaborates with physician and nurses, as well as other members of the healthcare team and other disciplines to coordinate superb care for inpatients.
8. Participates in the assessment of each patient's needs as initiated in the daily bedside rounds with the team physicians. Under physician direction, functions as the inpatient case manager and physician liaison for coordinating care, such as scheduling diagnostic and therapeutic procedures and facilitating the discharge process. Also initiates or facilitates inpatient referrals and consults and verifies and/or is a facilitator to assure the successful accomplishment of these procedures.
9. Functions as an inpatient case manager, conducting screening for appropriateness of care, and ensuring that post-hospitalization follow-up is arranged and discharge needs are addressed prior to patient discharge. Ensures continuity of care from the inpatient to the outpatient setting by assisting with the arrangements for primary care follow-up, outpatient procedures, scheduling of outpatient diagnostics and therapeutic procedures, as well as

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transportation home. Completes consults, forms, orders supplies, and collaborates with other staff (i.e., social workers, physical and occupational therapy, dietitians, specialty clinics staff) to assist in home arrangements and follow-up care. Also facilitates transition to other inpatient facilities as needed.

10. Serves as an educator to inpatient physicians concerning changing policies and procedures.
11. Assist in the development and implementation of care plans for case management through coordination of care. Collaborate with the interdisciplinary in establishing mutual goals with the patient/family by monitoring and evaluating patient's goal attainment.
12. Promotes and may provide health care teaching to patient and significant others.
13. Facilitates patient involvement in care by communicating ongoing patient status, identifying barriers to care, exploring motivational and adherence issues, evaluating support systems, and examining patterns that are over and underutilization of services.
14. Initiates referrals and establishes interdisciplinary professional relationships to achieve care including nutrition, social work, physical therapy, respiratory therapy and occupational therapy.
15. Utilizes the computer, DHCP, and CPRS to provide oversight of appointment scheduling for patient follow-up care needs, ensure that follow-up appointments are scheduled, and initiate scheduling capabilities as appropriate; to access medical information; and to document assessments, interventions, and outcomes.
16. Reports clinical outcomes of patients receiving case management intervention.
17. Assists in coordinating the admission of patients.
18. Able to perform effectively in an emergency.
19. Makes decisions based on professional standards and scope of practice (i.e., Nurse Practice Act, ANA standards).
20. Assists in obtaining outside records, films, biopsy slides, etc.

ETHICS: Supports and enhances patient self-determination. Serves as a resource for patients and staff in addressing ethical issues.

Performance Standards

1. The nurse, in all professional relationships, practices with compassion and respect for the inherent dignity, worth and uniqueness of every individual, unrestricted by considerations of social or economic status, personal attributes, or the nature of health problems (ANA Code of Ethics for Nurses).
2. The nurse promotes, advocates for and strives to protect the health, safety and rights of the patient (ANA Code of Ethics for Nurses).
3. Listens to and honors patient and family perspectives and choices. Patient and family knowledge, values, beliefs, and cultural backgrounds are incorporated into the planning and delivery of care in a non-judgmental, non-discriminatory manner (Patient and Family Centered Care).
4. Maintains professional boundaries with patients, families, and employees. Behavior as a role model is transparent and above reproach.
5. Demonstrates responsibility and accountability for own nursing judgments and actions.
6. Acts as a patient advocate when patient self-determination is questioned.
7. Recognizes ethical concerns and takes appropriate action.
8. Actively participates with ethic activities.

9. Safeguards patient privacy and maintains confidentiality of all electronic and printed patient information according to HIPAA guidelines, the Privacy Act, and as stated in the Medical Center Memo on ADP Security. Maintains confidentiality of assigned access code and by exiting (logging out) from the ADP system when leaving terminal. Does not share security codes and does not allow others to use the computer under own security codes. Maintains patient confidentiality by not discussing patient information except when necessary to authorized staff only in order to meet health care needs. Ensures application of institutional policy to protect information from unauthorized release, loss, alteration, or deletion. Does not use thumb-drives or other means, such as xeroxing, to remove patient data from the medical center, unless approval by the Director through OI&T has been granted.
10. Acts as a patient advocate.
11. Promotes positive public relations.
12. When appropriate, refers patient issues to Ethics Committee or Committee for the Management of Disruptive Behavior.
13. Serves as a resource and advocate in resolving legal/ethical issues such as Advanced Directives and the protection of patient/family rights.
14. Ensures application of institutional policy.
15. Maintains confidentiality and professionalism in ethical conduct.

RESOURCE UTILIZATION: Identifies and assesses resource utilization and safety issues, taking appropriate action.

Performance Standards.

1. Analyzes resources available and identifies risk areas, including budgetary, staffing, supplies and requirement and availability of data/information.
2. Demonstrates leadership with compliance with infection control practices, such as hand washing and wearing of appropriate personal protective equipment.
3. Demonstrates leadership in safe work practices. Complies with safety rules and regulations for safe job performance and fire protection. Practices safe body mechanics, uses mechanical devices, and/or requests help when needed in moving, lifting, or turning patients to prevent injury to patient, self or others. Promptly reports all accidents to supervisor and notifies supervisor promptly of unsafe or unhealthy environmental situations/conditions. Corrects safety hazards promptly. Puts broken equipment out of service immediately, tags it as such, and followsthrough for appropriate disposition of the broken equipment.
4. Conserves resources effectively by using supplies and equipment in a responsible manner. Will ensure employees follow appropriate standard operating procedures related to the equipment, devices, and work practices that impact or have the potential to impact the environment. Will comply with relevant environmental regulations, Executive Orders, and Green Environmental Management Systems (GEMS) initiatives. Will consider environmentally preferable recycled products in all purchasing decisions.
5. Leads within a framework of a High Reliability Organization with a culture of safety founded on a systems approach to developing health care solutions based on prevention, not punishment, with collective mindfulness.
6. *Contributes to an environment of a High Reliability Organization with a culture of safety founded on a systems approach to developing health care solutions based on prevention, not punishment, with collective mindfulness.*

7. *Manages clinical care through development and use of referral guidelines, service agreements, and utilization review.*
8. *Maintains safe working environment. Ensures all team members adhere to infection control practices and utilize proper body mechanics. Assures patient equipment is safe and functional, taking appropriate actions if equipment is malfunctioning.*
9. *Is knowledgeable and participates in emergency preparedness activities including utilizing appropriate evacuation technique, and knowledge of responsibilities for their area.*
10. *Utilizes time management strategies to complete assigned responsibilities.*

DIMENSION OF NURSING PRACTICE: PROFESSIONAL DEVELOPMENT
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EDUCATION/CAREER DEVELOPMENT Acquires knowledge and skills to maintain expertise in area of practice. Participates in educational activities to improve clinical knowledge and enhance role performance.

Performance Standards

1. The nurse owes the same duties to self as to others, including the responsibility to preserve integrity and safety, to maintain competence and to continue personal and professional growth (ANA Code of Ethics for Nurses).
2. Self-directed in seeking opportunities to increase knowledge and staff development activities.
3. Is self-directed in professional and staff development activities. Has an identified educational plan the he/she can articulate.
4. Participates in orientation, unit based in-services, and mandatory education activities in a self-directed manner.
5. Provides for own continuing professional development by literature review, continuing education certification, and formal education.
6. Actively participates on ad hoc, service, hospital or network wide committees and disseminates information, knowledge, trends and professional issues.
7. Promotes interdisciplinary interactions and problem solving.
8. Evaluates options available and selects a course of action which will result in the most favorable patient or organizational outcome based on current knowledge.
9. Develops and presents two (2) unit-level in-services per rating year.
10. Practices and fosters in staff that access to understandable health information can empower individuals to participate in their health care (Patient and Family Centered Care; Planetree).

PERFORMANCE: Evaluates practice of self and others using professional standards, relevant statutes, and regulations. Takes action to improve performance.

Performance Standards

1. The nurse participates in establishing, maintaining and improving healthcare environments and conditions of employment conducive to the provision of quality health care and

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consistent with the values of the professional through individual and collective action (ANA Code of Ethics for Nurses).

2. Assumes self-directed responsibility and accountability for evaluating own progress toward professional career goals.
 - 2.1. Establishes clear and measurable career goals which are discussed with the immediate supervisor.
 - 2.2. Works with the immediate supervisor to develop the specific objective plan by which the career goals will be met.
 - 2.3. Receptive to constructive feedback and accepts guidance in corrective performance deficits.
3. Demonstrates to the immediate supervisor the use of standards in own daily practice.
 - 3.1. Discusses with the immediate supervisor what specific professional organization's standards of practice he/she is using in evaluating own practice and what specific action can be taken to improve compliance.
 - 3.2. Discusses with the immediate supervisor what specific regulatory standards he/she is using in evaluating own practice, such as The Joint Commission (TJC) standards, and what specific action can be taken to improve compliance.
4. Evaluates unit performance as measured against TJC standards and takes action to correct deficits to ensure compliance as part of continued readiness.
5. Maintains professional knowledge and skills based on currently published or communicated information through reading, workshop, etc.
6. Assesses educational needs to implement program or service practice changes, develops and implements an education plan to meet needs for self or other staff in program/service. (Hand Hygiene Practice, Post- Discharge Call Backs, Code Blue Reviews, Med Error Reviews, etc.)
7. Participates in activities pertaining to Utilization Management, EPRP, development of Quality Management Programs, clinical indicators, etc.
8. Supports and encourages others to read and correctly interpret medical center and service-level policies and procedures.
9. Assumes leadership role in identifying policies, procedures, standards, guidelines, and protocols requiring review or revision.
10. Self-directed in providing positive and negative feedback to the supervisor on the performance of other staff.
11. Submits completed annual self-evaluation to the supervisor in a timely manner by the requested deadline.
12. Annual self-evaluation is realistic as measured by the qualification standards and the functional statement.
13. Utilizes time management strategies to complete assigned responsibilities.
14. Manages clinical care through development and use of referral guidelines, service agreements, and utilization review.
15. Maintains safe working environment. Ensures all team members adhere to infection control practices and utilize proper body mechanics. Assures patient equipment is safe and functional, taking appropriate actions if equipment is malfunctioning.
16. Is knowledgeable and participates in emergency preparedness activities including utilizing appropriate evacuation technique, and knowledge of responsibilities for their area.

DIMENSION OF NURSING PRACTICE: COLLABORATION

COLLABORATION: Uses group process to identify, analyze, and resolve care problems.

Performance Standards

1. Demonstrates positive, effective communication skills and professional behaviors that promote cooperation and teamwork with internal and external customers.
 - 1.1. Practices good customer service in all work activities.
 - 1.2. Displays courtesy, empathy, tact, and respect for patients, families/significant others, and hospital staff.
 - 1.3. Remains calm in stressful situations and takes appropriate action.
 - 1.4. Promotes personal and professional integrity in the workplace.
 - 1.5. Uses the proper chain of command for communication.
2. Works effectively with others by resolving conflicts and assisting others to cope with stressful situations.
3. Collaborates with peers and leaders to meet outcomes.
 - 3.1. Patient care
 - 3.2. Staff education and development.
 - 3.3. VA Performance Measures.
4. Collaborates with other disciplines and care givers and uses group processes for decision making in interdisciplinary problem solving.
5. Participates and supports NSQIP/CICSP activities and interact with team members, consistently demonstrating skilled communication techniques.
6. Practices and fosters in staff the belief that care giving is best achieved through kindness and compassion, and families, friends and loved ones are vital to the healing process (Patient and Family Centered Care; Planetree).

COLLEGIALITY: Educates colleagues and/or students and serves as a preceptor or mentor.

Performance Standards

1. Demonstrates professional behavior and good communication skills that enhance working effectively with others.
2. Functions as a consultant and mentor to other nurses.
 - 2.1. Is recognized and sought out by other staff to share unique knowledge and skills.
 - 2.2. Demonstrates leadership in improving nursing care through facilitation of the application of new knowledge and skill among staff.
3. Participates with Team Building sessions and demonstrates engagement.
4. Educates colleagues and/or students and serves as a preceptor.
 - 4.1. Serves as a teacher and advisor for orienting staff and establishes a supportive relationship over time.
 - 4.2. Assists in orienting staff and/or student nurses in learning nursing procedures.

- 4.3. Acts in a supportive, trustworthy, and non-threatening manner with new staff, and expects and ensures the same positive behavior from all unit staff.
- 4.4. Oversees the timely completion of the orientation checklists.
5. Participates as a member or assumes a leadership role on formal service level committees, councils, or performance improvement teams.
6. Acts as a role model in fulfilling work commitments.

DIMENSION OF NURSING PRACTICE: SCIENTIFIC INQUIRY
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QUALITY OF CARE: Initiates/participates in quality improvement activities that result in approved outcomes.

Performance Standards

1. Initiates /actively participates on interdisciplinary committees or groups that evaluate clinical practice or health services.
2. Uses principles of risk management to identify system issues, which impact on patient care.
3. Provides daily reviews on the nurse sensitive clinical indicators such as Falls, Pressure Ulcers, Restraints, etc., and provides expertise in support of the best care outcomes.
4. Actively involved in evaluating practice for a program or service, based on established professional, community or regulatory standards (i.e. Joint Commission) and recommending / implementing changes to meet those standards.
5. Evaluates own performance and pursues professional development.
6. Maintains a dashboard of clinical reports in all MCL areas.
7. Presents performance improvement monitors and results during monthly unit staff meetings.
8. Utilizes time management strategies to complete assigned responsibilities.

RESEARCH: Uses body of research to validate and/or change work group practice.

Performance Standards

1. The nurse participates in the advancement of the professional through contributions to practice, education, administration, and knowledge development (ANA Code of Ethics for Nurses).
2. Self-directed in sharing responsibility for evidence-based practice investigation activities within the work group.
 - 2.1. Identifies clinical problems/issues.
 - 2.2. Reads and evaluates evidence-based practice literature related to the identified practice/problem/issue (refereed research journals preferred (not clinical magazines).
 - 2.3. Incorporates the evidence-based practice knowledge into critical thinking about the practice/problem/issue.
 - 2.4. Uses the knowledge to validate or change work group practice.
3. Collaborates with and assists others within or across work groups to validate and/or improve practice (i.e. solve practice problems/issues) either on the basis of application of current researched based knowledge or the conduct of research. This may include methods to evaluate the outcomes of practice changes (innovations/interventions) and reporting.
4. Educates co-workers about the validation or change in practice during monthly unit staff meetings or other formal or informal educational unit-based forum.
5. Demonstrates leadership and assists others in incorporating research information, current literature and CQI findings into clinical practice.

V. SUPERVISORY CONTROLS

Refer to the service Organizational Chart for the supervisory chain of command and the location of the position. The incumbent is under the supervision of a Nurse Manager or other immediate supervisor who provides the administrative supervision and general instruction, plans and assigns work, assigns time schedules, approves leave, and completes performance evaluations. Clinical supervision is provided by a registered nurse, physician, or other provider. Incumbent is responsible for being self-directed in the delivery of patient care under moderate to close supervision and instruction by the registered nurse. During non-administrative tours, the Administrative Nursing Office on Duty (ANOD) provides general supervision and approves leave for RNs.

VI. AGE, DEVELOPMENT, AND CULTURAL NEEDS OF PATIENTS

The population of male and female veterans served ranges from the adult, age 18, to the elderly adult, age 65 and over. Age-related and cultural interventions appropriate to the cognitive, physical, and emotional needs will be employed at all times, tailored to the individual patient, incorporating knowledge of changes associated with aging and principles of growth and development. The incumbent must be poised, articulate, adaptive and respectful in communicating with and caring for people of varied educational, ethnic, religious and cultural backgrounds. Care will be provided to Veterans without discrimination and harassment, tailored to his/her needs, regardless of a veteran's age, race ethnicity, religion, culture, language, physical or mental disability, socioeconomic status, sex, sexual orientation, and gender identity or expression. Knows how to obtain translation services for patient or families with limited English language proficiency or who need sign language services.

VII. CUSTOMER SERVICE REQUIREMENTS

MEDVAMC embraces patient-family centered care principles. The incumbent practices good customer service in all work activities. Must be poised and articulate in communicating with people of varied educational levels and varied ethnic backgrounds. Makes caring for the veteran his/her priority while in the work setting and demonstrates customer service principles in all aspects of work. Willing to work cooperatively as a member of a team in all assignments.

VIII. COMPUTER SECURITY REQUIREMENTS

The incumbent consistently protects printed and electronic files containing sensitive data in accordance with the provisions of the Privacy Act of 1974 and other applicable laws, federal regulations, VA statutes and policy, and VHA policy. Protects the data from unauthorized release or from loss, alteration, or unauthorized deletion. Follows applicable regulations and instructions regarding access to computerized files, release of access codes, etc., as set out in the computer access agreement that the incumbent signs. Reports all known information security incidents or violations to the supervisor and/or the Information Security Officer immediately. Reports all known privacy incidents or violations to the Privacy Officer immediately. Compliance is measured by supervisory observation and periodic random monitoring by the Information Security Officer or Office of Information Technology staff. Major violations such as loss of or unauthorized release, alteration, or deletion of sensitive data are unacceptable.

IX. SAFETY

The incumbent embraces a continuous culture of safety for veterans, their families, visitors and other employees.

Environment of Care: Follows Life Safety Management (fire protection) procedures. Reports safety hazards, accidents and injuries. Familiar with hazardous materials, Material Safety Data Sheets (MSDS), and waste management procedures. Follows Emergency Preparedness plan. Follows building security policies/procedures. Complies with federal, state, and local environment and other requirements preventing pollution, minimizing waste, and conserving cultural and natural resources.

Infection Control: Demonstrates infection control practices for disease prevention, i.e., handwashing, standard precautions, and isolation procedures including TB requirement/precautions. No eating or drinking or the storage of such containers in patient care areas, including nurses' stations.

Health and Safety: Fosters a high profile of the VA Occupational Safety and Health Program by assuring employee awareness of potential safety hazards, promptly reporting all injuries and ensures supervisors are effective in corrective actions necessary to eliminate safety and health hazards in the work area.

X. ON-GOING EDUCATION AND TRAINING/COMPETENCY VALIDATION

Basic Life Support (BLS) required for RNs in direct patient care positions per policy. Advanced Cardiac Life Support (ACLS) required in specific specialty areas and assignments per policy. Incumbent will be self-directed in completing orientation and on-going mandatory education. Will actively participate in annual competency assessment and validation. Specialty assignments may require a scope of practice for procedures beyond basic education.

XI. PHYSICAL DEMANDS

This position requires visual acuity (including depth perception), keen hearing (aide permitted), clear distinctive speech, and manual dexterity in both hands. This position requires potentially long periods of continued walking (2-4 hours), standing (2-6 hours), stooping, sitting, bending, pulling (1-2 hours), and pushing (1-2 hours). lifting (≥ 50 pounds), carrying (≥ 50 pounds). Transferring patients and objects may be required. Mechanical inpatient lifts are provided. The incumbent may be exposed to infected patients and contaminated materials and may be required to don protective clothing in isolation situations, operative/invasive procedures, or home settings. The incumbent may be exposed to patients who are combative secondary to delirium, dementia, or psychiatric disorders. Ability for rapid mental and muscular coordination simultaneously. The incumbent must be a mature, flexible, sensible individual capable of working effectively in stressful situations, able to shift priorities based on patient needs. Must complete annual Employee Health requirements, such as annual TB screening or testing, as a condition of employment. Must be able to work closely with others, as well as protracted or irregular hours of work. Must be compliance with the use of ergonomic exercises and employee safety requirements.

XII. CONTINUED ACCREDITATION READINESS

RESPONSIBLE FOR ENSURING HIS/HER ACTIONS CONTRIBUTE TO A MODE OF CONTINUED

ACCREDITATION READINESS REGARDING Joint Commission (TJC), Office of Inspector General (OIG),

Commission on Accreditation of Rehabilitation Facilities (CARF), VA surveyors, Laboratory College of American Pathologists (CAP), and other survey teams. Can articulate standards of care and practice, policies and procedures/SOPs; documentation is complete and timely; has situational awareness of safety and other environment of care issues; initiates corrective actions ("If not me, who? If not now, when?"); maintains safety and infection control standards; strictly protects verbal written, and electronic patient personal and health information; maintains a professional, healthcare business environment; participates in and can articulate performance improvement data and how it impacts patient care.

XIII. OTHER FACTORS

This position potentially requires flexibility in schedule and assignments, as this is a 24/7 hospital. Some positions require rotation of tours or indefinite work on non-administrative tours as established by the immediate supervisor. Self-motivated in the pursuit of meeting professional work standards. Not all duties may be listed, so other duties may be assigned. Self-motivated in the pursuit of meeting professional work standards.

If the incumbent is a purchase card holder, performs the duties of a Government-wide Purchase Card Program cardholder in support of his/her service/ department/service line. The cardholder is required to complete all required training courses as directed by the agency/organization program coordinator. Responsible for the proper use of the purchase card, being knowledgeable and complying with assigned spending regulations. Complies with all Federal, VA, and local purchase card program regulations. Verifies funds availability prior to making purchases and ensures receipt of goods ordered. Safeguards the purchase card at all times. Complies with all purchase card program audits.

Michael E. DeBakey Veterans Affairs Medical Center

Houston, Texas

FUNCTIONAL STATEMENT ADDENDUM

Medical Care Line

RN Case Management (CM)

II. GENERAL DESCRIPTION OF ASSIGNED DUTIES

The registered nurse case manager provides care and counseling of persons or in the promotion and maintenance of health and prevention of illness and injury based upon the nursing process which includes systematic data gathering, assessment, appropriate nursing judgment, and evaluation of human responses to actual or potential health problems through such services as case finding, health teaching, health counseling; provision of care supportive to or restorative of life and well-being; and executing medical regimens including administering medications and treatments prescribed by a licensed or otherwise legally authorized provider. (Texas Board of Nursing) The nurse case manager's primary commitment is to the patient, whether an individual, family, group, or community. (ANA Code of Ethics for

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Nurses)

The RN Case Manager is organizationally responsible to the Nurse Executive or designee and serves as direct staff support to Medical management, section chiefs, and all others in planning, designing, integrating, implementing, modifying, and administering a Quality Assessment and Improvement Program that evaluates and seeks to improve the quality of clinical care and/or the appropriateness and timeliness of Medical services provided. He/she provides support to key staff regarding the compilation and analysis of clinical and administrative data, quality of care assessments, risk management and utilization of resources throughout the care line. The incumbent is responsible for demonstrating clinical expertise and providing support to RN Case Management in the Medical Care Line/ Medical Service in the development and implementation of systems to improve the quality of patient care and to ensure compliance with internal and external requirements and standards. Additionally, the RN Case Manager is responsible for using her/his clinical knowledge and judgment in reviewing medical records to evaluate the quality and appropriateness of care provided and providing meaningful analysis of data for the purpose of improving the clinical management of patients. She/he is responsible for recommending action to improve care.

Scope of Nurse – RN Case Manager:

The RN Case Manager of the Medical Care Line will practice in accordance with the scope of practice of the Board of Nurse Examiners and the Nurse Practice Act; the rules and regulations; policies; procedures; and guidelines of MEDVAMC, VHA directives, Joint Commission and other certifying and surveying agencies, professional organization standards, practice within the nine dimensions outlined in the Nurse Qualification Standards and which are specific to the Grade and Level, and practice patient safety according to the National Patient Safety Goals. The RN Case Manager will interact and collaborate with the MEDVAMC Medical Care Line Providers, and individuals in various health care disciplines, and work together to solve problems affecting quality of care involved, performance measurement, data collection, documentation, and seeking solutions to problems quality improvement.

FUNCTIONS OF ASSIGNED DUTIES: Specific position duties and additional roles (not all inclusive)

1. **Main Responsibilities of MCL RN Case Manager** – The professional case manager performs the primary functions of assessment, planning, facilitation, coordination, monitoring, evaluation, and advocacy.
2. **Specific Duties of MCL RN Case Manager**
 - a. Collaboration
 - i. With Medical Care Line Medical Services and Members of Multidisciplinary Teams:
 - 1) Consider predictive modeling, screening, and other data, where appropriate, in deciding whether a client would benefit from case management services.
 - 2) Conduct an assessment of the client's health, physical, functional, behavioral, psychological, and physiological needs.
 - 3) Identifying target care goals in collaboration with client, client's family, or caregiver, and other members of the healthcare team.
 - 4) Planning the care interventions and needed resources with client, family, or caregiver, the primary provider, other healthcare professionals, and the community-based agents.
 - 5) Facilitate communication and coordination among members of the interprofessional healthcare team, and involving the client in the decision-making process in order to

- minimize fragmentation in the services provided and prevent the risk for unsafe care and suboptimal outcomes.
- 6) Collaborating with other health care professionals and support service providers across care settings, levels of care, and professional disciplines, with special attention to safe transitions of care.
 - 7) Coordinating care interventions, referrals to specialty providers and community-based support services.
 - 8) Communicate on an ongoing basis with the client, client's family or caregiver, other involved healthcare professionals and support service providers.
 - 9) Educating the client, the family or caregiver, and members of the healthcare team about treatment options, and community resources.
 - 10) Ensuring the appropriate allocation, use, and coordination of health care services and resources while striving to improve safety and quality of care, and maintain cost effectiveness on a case-by-case basis.
 - 11) Identifying barriers to care and client's engagement in own health; addressing these barriers to prevent suboptimal care outcomes.
 - 12) Assist the client with safe transitioning of care to the next most appropriate level, setting, and/or provider.
 - 13) Advocating for both the client and family to facilitate positive outcomes for the client, healthcare team, and the family.
 - 14) Evaluate the value and effectiveness of case management plans of care, resource allocation, and service provision while applying outcomes measures reflective of organizational policies and expectations, accreditation standards, and regulatory requirements.
 - 15) Engage in performance improvement activities with the goal of improving client's access to timely care and services, and enhancing the achievement of target goals and desired outcomes.
- ii. Facilitate compilation of reports from MCL RN Case Managers on inpatient length of stay barriers reports On the Medical Services; LOS Microsoft Teams Report. Ensures care coordination plans are in compliance with VHA and JC policies.
 - iii. Collaboration with the HAI (Hospital Acquired Infection) Committee and Infection Control and Prevention Department as well as other committees
 - 1) Attend all committee meetings and be prepared to speak to the following metrics:
 - a) HAI CLABSI (Central Line-Associated Bloodstream Infection)
 - b) CAUTI (Catheter-Associated Urinary Tract Infection)
 - c) VAE (Ventilator-Associated Events)
 - d) MRSA (Methicillin Resistant Staphylococcus Aureus)
 - e) Clostridium difficile
 - f) Restraints
 - g) PRN Effectiveness
 - h) Fall
 - i) Other metrics that are subject to change and/or are in addition
 - iv. Collaborate with the MCL Nurse Executive to monitor nurse sensitive patient care events:
 - 1) HAPI/CAPI reports
 - 2) JPSR responses

RN Case Manager (CM): Nurse II

- v. Collaborates with Medical Care Line Chief of Staff to hard wire unit-based process changes
 - b. Participates in the MCL committee meetings when required
 - c. Participates in the Key Leaders meeting when required
 - d. Participates in the Interdisciplinary meeting when invited to report
 - e. Participates in the Interdisciplinary Care meeting when required
 - f. Participates in initiating or collaborating on quality process improvement projects specific to EPRP metrics and NDNQI (National Database of Nursing Quality Indicators).
 - g. Tracks, assists, and updates MEDVAMC MCL policies
 - 1) Other metrics that are subject to change and/or are in addition
3. REUSABLE MEDICAL EQUIPMENT: Demonstrates compliance with all policies regarding Infection Control practices pertaining to pre-cleaning and processing RMEs.
- a. Performs effectively all processes associated with preparation of RMEs per SOP for MEDVAMC specific to each device according to manufacturer's recommendations and requirements.
 - b. Attends ongoing training and education regarding RMEs.

Technically Reviewed by MCL Nurse Case Manager Supervisor

XIV. REFERENCES

American Nurses Association (ANA) Code of Ethics for Nurses and Standards of Nursing Practice.

Benner, Patricia. From Novice to Expert.

Emergency Nurses Association (ENA). (n.d.). Position statements Retrieved from <http://222.ena.org/about/position/Pages/Default.aspx>

Patient and Family-Centered Care, Institute for Family-Centered Care.

Planetree Incorporated, Patient-Centered Care.

VA Handbook 5005, Part II, Appendix G6, Nurse Qualification Standard.

Technically Reviewed by MCL Nurse Case Manager Supervisor

LaTonya Holman


6-5-2020

This statement of RESPONSIBILITIES, FUNCTIONS AND CRITERIA BASED PERFORMANCE STANDARDS *has been reviewed with me by my rating official*. The following statements are signed to indicate the appropriate reviews:

- a. I received this document and had *the expected performance activities reviewed and explained to me upon entering duty*.

EMPLOYEE
SIGNATURE: _____ DATE: _____

REVIEWER: _____ DATE: _____

- b. My *performance was reviewed with me approximately 90 days after my entry on duty*.

EMPLOYEE
SIGNATURE: _____ DATE: _____

REVIEWER: _____ DATE: _____

- c. My *performance was discussed with me during my annual proficiency review*.

EMPLOYEE
SIGNATURE: _____ DATE: _____

REVIEWER: _____ DATE: _____