

Chapter: Personnel	Effective Date: 12/1/13
Title: Clinical Case Manager Responsibilities	Page: 1 of 3
ACA: N/A	Replaces: HHS.15.15, 11/21/13

(a) **Standard.**

A clinical case manager reviews halfway house health records and meets with Texas Juvenile Justice Department (TJJD) youth as indicated to ensure timely, appropriate care and continuity of care.

(b) **Definitions.**

Special Medical/Dental/Psychiatric Needs--relating to youth who have specific medical/dental needs such as those associated with a disability (e.g., need for a wheelchair, prosthesis, etc.).

(c) **Procedures.**

(1) **Admission Including Recommitment and Revocation.**

(A) Within seven workdays after admission:

(i) the **clinical case manager:**

- (I) reviews the Halfway House Facility Intake Health Screening, [HLS-102](#), and all community records;
- (II) meets with the youth in person or via digital medical services (DMS);
- (III) completes the Admission Assessment and Medical Review File, [HLS-103](#), or if the youth is transferring to a halfway house from the assigned institution (has same clinical case manager), a thorough note is required to document all pertinent information and an HLS-103 is not needed;
- (IV) faxes or scans/emails the HLS-103 to the human services specialist (HSS) for the youth's signature and placement in the daily health records binder; and
- (V) forwards the HLS-103 via an electronic medical record (EMR) email to the health services administrator (HSA).

(B) The **clinical case manager:**

- (i) completes the Halfway House Medical, Dental, and Health History Report, [HLS-107](#), and sends a copy to the HSS via scan/email to be filed in the daily health records binder behind the youth's picture;
- (ii) sends an email to the HSS and superintendent/designee with detailed information relating to special medical needs (e.g., medical alerts, chronic health conditions, special medical needs, etc.) and scans a copy of the email into the EMR;
- (iii) audits the medical file of each youth at 90 days after admission and every six months thereafter using the UTMB Correctional Managed Care Chart Audit Tool, [HLS-650](#), noting all deficiencies, and forwards a copy of the form via scan/email to the HSS to be placed in the Chart Audit Active section of the health services management systems binder for correction of deficiencies; and

- (iv) collaborates weekly with the registered nurse, HSS, and HSA to ensure timely, appropriate care and continuity of care.

(2) **Direct Admission from the Community.**

The **clinical case manager:**

- (A) completes all responsibilities outlined in (1) above.
- (B) contacts the youth's parent/guardian to:
 - (i) introduce the UTMB Case Management Program and explain how it works; and
 - (ii) verify past and present medical and dental needs (e.g., allergies, chronic conditions, special needs, history of varicella, etc.) of the youth.

(3) **Youth with Chronic Care, Medical Alert, and/or Special Medical/Dental/Psychiatric Needs.**

The **clinical case manager:**

- (A) completes responsibilities outlined in (1) or (2) above as applicable, with the following exception: meeting with the youth in person or via DMS must be completed within three workdays after admission;
- (B) performs a monthly chart review, including review of all EMR reminders to ensure they are scheduled and up-to-date (starting from last review date), and documents any findings on the CM-Progress Note in the EMR; and
- (C) meets with the youth in person or via DMS every 90 days to:
 - (i) discuss and review his/her treatment plan;
 - (ii) provide education for any of the youth's conditions and any other issues; and
 - (iii) document the discussion on the CM-Progress Note in the EMR.

(4) **Movement to Another TJJD Placement.**

Prior to the youth's release to another placement, the **clinical case manager:**

- (A) notifies (by email or telephone) the receiving staff of any special health care needs or pertinent medical information; and
- (B) documents the notification on the CM-Progress Note in the EMR.

(5) **Release or Discharge.**

The **clinical case manager:**

- (A) completes a Discharge Summary, [HLS-610](#);
- (B) if the youth is being released or discharged, faxes or scans/emails the HLS-610 to the HSS for signature by the youth and TJJD case manager and placement in the daily health records binder for scanning into the EMR;
- (C) upon notification of the youth's release or discharge, completes a Medication Follow-Up letter, [HLS-200a](#), and/or a Medical/Dental Appointment Follow-Up letter, [HLS-200b](#); and

(D) provides a copy of the [HLS-610](#), [HLS-200a](#) and/or [HLS-200b](#), if applicable, and immunization record to the TJJD case manager for placement in the youth's portfolio.

(6) **Additional Job Responsibilities.**

The **clinical case manager:**

- (A) is responsible for other duties as assigned by the HSA to assist at the HSA's/CCM's assigned facility; and
 - (B) assists TJJD in obtaining parental/guardian consent for invasive medical/dental procedures.
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