OUR EXCITING OPPORTUNITY

Community Action Partnership has an exciting opportunity for

**Lead Care Coordinator**

In this role, the Enhanced Care Management (ECM) Lead Care Coordinator will assist with the development and implementation of program procedures and ensure that requirements are aligned to build sustainable support in impacting the lives of hundreds of residents, playing a critical part in the work and dedication of Community Action Partnership of Orange County’s initiatives. It’s leadership with a cause and the rewards are immeasurable!

**WHO WE ARE**

Born out of the War on Poverty more than 50 years ago, Community Action Partnership Orange County (CAP OC) is a trusted resource for Orange County community members who face obstacles such as food insecurity, unemployment, economic turmoil and more. We walk alongside the people we serve, and we act to meet immediate needs without delay. Our programs help empower people to improve their lives and their communities. We see poverty as an unacceptable reality for our neighbors and rally with key partners to help facilitate change.

CAP OC hires professionals who support and embody the following **EPIC** values:

**Going above and beyond in every interaction and activity we undertake. We strive for **EXCELLENCE** in service, keeping a pulse on the most up to date innovations within our industry. Together we continually assess and improve the way to work and enhance the strategies we utilize to meet the needs of our community.**

**Reaching our goals by working collaboratively with each other and our community. We are working to do the things that have not been done: empowering families and individuals to financial independence, breaking the cycle of poverty, creating financial equity, combating food insecurity, and establishing healthy and energy-efficient living conditions for all through social innovation. All of this takes **PROACTIVENESS**, and an intrinsic motivation that drives us to go above and beyond to create cutting-edge trends and program designs. We have the will and the energy and won’t stop until the needs of our underserved community no longer exist.**

**We are a team of high **INNOVATION.** We value the work we do; the people we serve; and treat each other with respect and kindness. We also have an environment of engaging in social economic justice by sharing of ideas and not afraid to try new things that increases our educational capacity. We think outside of the box, and challenge prevailing assumptions about issues of poverty.**

**Reaching our goals by working in partnership with each other and our community. The work we do is deeply rooted in the **COLLABORATION** we have with our community and its citizens. We care about the legacy of community action partnership and go above and beyond to ensure we support each other in bringing forth the services and resources that will positively change generations forever.**
We have remained true to our mission “We seek to end poverty by stabilizing, sustaining and empowering people with the resources they need when they need them. By forging strategic partnerships, we form a powerful force to improve our community.”

VALUES

In addition to our EPIC values our external values are as follows:

Leadership
We are guiding critical shifts in how people think and act to address the root causes of poverty

Collaboration
We bring together all capable partners to achieve transformative results

Trust
For over 50 years, the community has counted on us to empower those in need

Compassion
We treat each person we serve respectfully and with great care

Justice
We are passionate about advocating for those living in poverty and creating equity throughout the region

WHAT YOU WILL ACCOMPLISH IN THIS ROLE

The primary duties of the ECM Lead Care Coordinator are providing intensive, in-person care management services to the most vulnerable populations including but not limited to individuals and families experiencing homelessness, high utilizers, children and youth involved in child welfare and tenants occupying CAP OC housing units. The ECM Lead Care Coordinator will focus on both the clinical and non-clinical needs of individuals and operate as part of the member's multi-disciplinary care team and is responsible for coordinating all aspects of Enhanced Care Management (ECM).

The salary for this position is $24.00 - $26.00 per hour.

This position will follow a hybrid schedule, with the ECM Lead Care Coordinator’s time split between the Office, time in the Field, and Remote work. The exact split may fluctuate from week to week and the Lead Care Coordinator is expected to exercise professional discernment in determining the best allocation of his/her time, and were. Hybrid schedules are subject to change based on program needs and/or the reporting manager’s discretion.

ROLES AND RESPONSIBILITIES

- Provide comprehensive case management that includes screening and assessing clients; creating, implementing, and monitoring individual care/service plans; crisis intervention; connecting clients to health, mental health, employment, housing, and other community resources including CalAIM community supports and transportation.
- Oversee the provision of ECM services including the development and implementation of the care plan.
• Maintain accurate documentation of service objectives and outcomes as well as other services in accordance with established guidelines.
• Promotes clear communication amongst interdisciplinary care team members by ensuring awareness regarding client’s care plans.
• Coordinate with the client’s providers including but not limited to medical, behavioral health, specialists, and housing navigators.
• Provide supportive services to residents occupying CAP OC’s rental units.
• Accompany clients to office visits, as needed.
• Coordinate with individuals and/or entities to ensure a seamless experience for clients and non-duplication of services.
• Utilize motivational interviewing, trauma-informed care, and harm-reduction approaches.
• Monitor treatment adherence (including medication).
• Provide health promotion and self-management training.
• Complete and submit program reports, on a scheduled basis or as needed.
• Engage eligible members.
• Other duties as assigned.

THE IDEAL CANDIDATE HAS KNOWLEDGE AND EXPERIENCE IN
• Knowledge of case management, housing services, and poverty issues.
• Planning, developing, and implementing care/service plans.
• Extensive understanding of medical terminology to communicate effectively with healthcare providers and interpret medical records accurately.
• In-depth knowledge of health insurance plans, coverage, and claims processes.
• Familiarity with Medicare, Medicaid, and private insurance policies.
• Proven ability to develop comprehensive care plans tailored to individual patient needs.
• Skills in coordinating with healthcare providers to ensure all aspects of patient care are covered.
• Experience conducting thorough needs assessments to identify the medical, social, and psychological needs of patients.
• Ability to utilize assessment tools and methodologies effectively.
• Excellent verbal and written communication skills to interact with patients, families, and healthcare providers.
• Ability to explain complex medical and insurance information in a clear and understandable manner.
• Strong organizational abilities to manage multiple patients and coordinate various aspects of their care.
• Efficient time management to prioritize tasks and ensure timely delivery of services.
• Ability to identify issues, develop solutions, and implement changes to improve patient care and outcomes.
• Critical thinking skills to analyze situations and make informed decisions quickly.
• Strong empathy and interpersonal skills to build trusting relationships with patients and their families.
• Ability to work collaboratively with a multidisciplinary healthcare team.
• Proficient in using electronic health records (EHR) and care management software.
• Familiarity with telehealth platforms and other digital health tools.
• Understanding of healthcare regulations, compliance requirements, and best practices.
• Knowledge of patient privacy laws, such as HIPAA, to ensure the confidentiality of patient information.
• Basic teaching, training skills and techniques, and public speaking skills.
• Working both independently and collaboratively within a team.
• Analyzing and interpreting various materials to make recommendations, and understand and apply program rules, regulations, and procedures.

IDEAL CANDIDATE MUST BE
• Background in nursing, social work, or a related healthcare field.
• Hands-on experience in a clinical setting, preferably in care coordination or case management roles.
• Experience with healthcare administration tasks, including scheduling, documentation, and resource allocation.
• Familiarity with administrative procedures and protocols in a healthcare environment.
• Experience in advocating for patients’ rights and ensuring they receive appropriate care and services.
• Ability to navigate healthcare systems and assist patients in accessing necessary resources.
• Experience managing care for patients with chronic diseases, coordinating long-term care plans, and monitoring progress.
• Knowledge of chronic disease prevention and management strategies.
• Understanding of community resources and services available to support patients’ social and health needs.
• Ability to connect patients with relevant community programs and services.
• Experience in collecting and analyzing patient data to monitor outcomes and improve care processes.
• Ability to use data to identify trends, make recommendations, and implement improvements.
• Skills in resolving conflicts and addressing patient or family concerns effectively.
• Ability to mediate between patients, families, and healthcare providers to achieve positive outcomes.
• Customer service oriented: Establish and maintain effective working relationships with CAP OC’s staff, clients, and representatives of other organizations.
• Ethically Focused: Understand ethical behavior and business practices and ensure own behavior and the behavior of others are consistent with these standards and align with the values of the organization.
• Inclusive: Work cooperatively and effectively with others to set goals, resolve problems, and make decisions that enhance organizational and program effectiveness.
• Leader: Positively influence others to achieve results that are in the best interest of the organization and participants.
• Work focused: Being detail-oriented while working accurately and efficiently on a consistent basis without assistance. Strong organizational skills.
• Flexible: Work locations will vary between an office environment and working in the community which can include working outdoors in varying temperatures and weather conditions. May require working weekends/ evenings/ holidays when/if needed to meet client/production demands. Workdays and hours of work are subject to change.
• Language skilled: Must demonstrate clear, concise, and effective communication skills both orally and in writing in English.
• Mathematical: In a timely manner correctly create, compose, and complete mathematical equations on a computer and/or to complete forms for reports and/or presentations. Compile numbers, statistical data, and obtain other information for forms, reports, and presentations.
• Computer literate: Competently use the Internet, Web based databases, Microsoft Office (Word, Excel, PowerPoint, Outlook, Publisher and Access) and other applications. Experience with virtual communication platforms. Use a variety of computer databases to ensure that client records, statistics and reports are completed.

**EDUCATION AND EXPERIENCE**

Bachelor’s degree in Nursing, Social Work, Healthcare Administration, or a related field (Master’s degree preferred).

Relevant certifications, such as Certified Case Manager (CCM) or Certified Professional in Healthcare Quality (CPHQ).

A minimum of 5-7 years of experience in care coordination, case management, or a related healthcare role.

**TRAVEL**

Possess a valid California Driver’s License with a driving record that meets minimum standards established by CAP OC insurance carrier, proof of vehicle insurance, access to a vehicle and willingness to drive/travel when required.

Typically, travel is local during the business day to/from CAP OC locations and to/from community events which are usually within Orange County; possible day travel to/from LA county and Inland Empire counties is possible. The incumbent will use their personal vehicle. Travel may be during evening hours with possible out-of-the-area and overnight travel.

**PHYSICAL DEMANDS**

The physical demands described here are representative of those that must be met by an employee to successfully perform the essential functions of this job.

While performing the duties of this job, the employee is regularly required to bend, stoop, reach, pull, push, stand, kneel, sit, twist, turn, walk, bend at the waist, talk and hear, prolonged and fine dexterity of fingers and wrists with prolong computer work, vision abilities include close vision, distance vision, color vision, ability to adjust focus, and prolong periods of looking at a computer screen. The employee must regularly lift and/or move objects up to twenty (20) pounds. Employee will experience prolonged periods of sitting at a desk and/or standing. Employee may be called upon to work outdoors in varying temperatures and weather conditions.

**MEDICAL EXAMINATION AND BACKGROUND CHECK**

A medical examination is required of each new employee whose physical condition must meet the minimum requirements prescribed for the position. In addition, prospective employees must pass a pre-employment physical, drug screen, Live Scan, and background check. Reasonable accommodations may be made to enable individuals with disabilities to perform the essential functions.
THE PROMISE OF COMMUNITY ACTION
Community Action changes people’s lives, embodies the spirit of hope, improves communities, and makes America a better place to live. We care about the entire community, and we are dedicated to helping people help themselves and each other.

HOW TO APPLY
Please Apply at Community Action Partnership of Orange County’s website at www.capoc.org.