TTSTA Nurse Case Manger (NCM) & Nurse Practitioner (NP) Services

Goal: Access & Quality
The following Nurse Services are available upon referral to the TTSTA project:

1) Refugee Pre-Arrival Health Screenings Document Review (for new arrivals)
   a. Purpose: to alert VOLAG Health Coordinator and Case Managers to priority health concerns on Refugee Pre-Arrival Health Screening papers.
   b. This is an across-site care coordination service.
   c. A 2-4 hour time is block scheduled monthly/weekly or as needed for Nurse Case Manager (NCM) to meet at VOLAG with the VOLAG Health Coordinator and/or Case Managers for this review.
   d. NCM completes VOLAG Refugee Pre-Arrival Health Screenings Document Review form for each refugee’s Document, attaches it to its related Document.
      i. When the review is completed, the NCM shares the results with the VOLAG Health Coordinator and/or Case Managers.
      ii. The refugees are solely VOLAG clients.
   e. Documentation
      i. NCM documents this service in the UWM Automated Community Health Information System (ACHIS) Group Encounter database as a group ‘Screening’ intervention using the demographics for the group of refugees whose Document was screened during the review session.
      ii. VOLAGs follow their respective procedures for documentation.

2) New Refugee Arrival Referrals from VOLAG (for Refugees with iCare Badgercare or T19 coverage):
   a. VOLAG Health Coordinator or Case Manager faxes the newly arrived Refugee Pre-Arrival Health Screening Document to the Nurse Case Manager (NCM).
      i. VOLAG staff makes CSM FHC screening appointment for Refugee.
      ii. VOLAG staff notifies NCM of the CSM FHC screening appointment time.
   b. NCM opens a UWM ACHIS MCR (Master Client Record) and reviews the Refugee Pre-Arrival Health Screening Document.
      i. Demographic and review information is entered in ACHIS.
      ii. Coded as Focus Area - 4:41 PP and Intervention 3:4728 with no KB, and optional S
   c. NCM meets Refugee and VOLAG staff at CSM FHC at the appointed time.
      i. NCM explains TTSTA project, provides an overview of the U.S primary health care system, and explores choice of primary care provider with Refugee.
ii. If Refugee chooses the UWM Silver Spring Community Nursing (SS CNC) as their primary care site, the NCM completes initial nursing assessment per the *Immigrant and Refugee Intake Guide*. 
iii. NCM schedules primary care appointment for Refugee at UWM SS CNC as needed. 
iv. When seen at UWM SS CNC the Refugee becomes part of this NCM’s caseload.
   1. SS CNC Nurse Practitioner (NP) refers to NCM if any further health teaching or referrals, specialty care coordination or care coordination with VOLAG or iCare are needed for this Refugee. 
   2. NCM reviews this Refugee’s ACHIS client record at least every 2 months to assure care plan continuity and contacts VOLAG case manager as needed for care coordination. 
   3. NCM, in collaboration with Refugee and VOLAG staff, assesses this Refugee’s family health needs and follow up as needed. 
   v. If Refugee chooses another primary care clinic, the NCM will follow up with any identified concerns from the initial nursing assessment or refer to the TTSTA Health Manager for follow-up on establishment of primary care services. 

3) Nurse Consultations  
   a. Purpose: To provide professional health and nursing information and expert nurse consultations for VOLAG case management and staff development. 
   b. This is a TTSTA interprofessional collaborative practice (IPCP) service for VOLAG clients. 
   c. Nurse consultations can occur:
      i. Formally, through scheduled meetings or phone calls/Skypes; or
      ii. Informally, during TTSTA team meetings or other activities. 
   d. These consultations are recorded internally for purposes of grant reporting of IPCP activities. 

4) SS CNC Primary Care Services for Settled Refugees or Immigrants with iCare Badgercare or T19 coverage  
   a. Purpose: To improve access to Immigrant and Refugee sensitive primary health care. 
   b. VOLAG staff calls SS CNC to schedule primary care appointments as needed. 
      i. SS CNC Receptionist calls VOLAG to report all no shows for appointments. 
   c. SS CNC NP refers to NCM for identified client needs. 
   d. UWM ACHIS MCR is opened for primary care and NCM services documentation. 

5) Nurse Case Manager (NCM) Outreach and Case Finding  
   a. Purpose: To provide information about the TTSTA project to VOLAG Immigrant and Refugee clients. 
   b. This is a TTSTA interprofessional collaborative practice (IPCP) service for VOLAG clients. 
   c. Outreach: NCM accompanies VOLAG staff for a designated block of time on their routine client follow-up visits and speaks to clients about the TTSTA project and UWM SS CNC primary care services. 
      i. NCMs document this activity in the UWM ACHIS Group Encounter database as a group ‘Outreach’ intervention using the demographics for the group of Immigrants and Refugees who were visited during the session. 
   d. Case Finding: During the course of the Outreach session, the NCM may observe or hear something the client shares that triggers a concern that needs further health assessment and possible referral for health care. The NCM then performs a focused nursing assessment and makes recommendations to the client and/or VOLAG staff based on these findings. 
      i. NCMs open an UWM ACHIS MCR to document this 1:1 client encounter. 
      ii. The specific concerns/problems address are coded along with any referrals. 
      iii. The NCM provides ecological nurse case management services for up to six-months as needed.
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