

Director of Case Management- Pearland

The Director of Case Management is responsible and accountable for the implementation of the case management program at the local level. The components/roles of the inpatient case management program consist of the following: Care Facilitation, Utilization Management, Case Management and Discharge Planning.

The Director is responsible for developing systems and processes for care/utilization management and discharge planning at the hospital level. In addition, the Director may be responsible for managing the department's activities related to discharge planning and clinical quality improvement. The Director evaluates and ensures that hospital resources are used appropriately and effectively. The Director oversees the collection, analysis, and reporting of financial and quality data related to utilization management, quality improvement, and performance improvement. The Director promotes interdisciplinary collaboration, fosters teamwork and champions service excellence.

Principal Accountabilities

Plans, directs, and supervises all aspects of the local-level program. Facilitates growth and development of the case management program consistent with enterprise-wide philosophy and in response to the dynamic nature of the healthcare environment through benchmarking for best practices, networking, quality management, and other activities as needed.

Responsible for approving and managing the day-to-day local-level operational budget.

Assures that revenue, expenses, contribution margin, and FTEs meet or exceed budget.

Prepares and submits budget and related reports.

Forecasts and accurately projects expenses.

Takes corrective action to address negative variances.

Identifies and proposes capital budget items appropriately.

Identifies and achieves optimal targeted financial outcomes via the

inpatient case management process.

Responsible for departmental personnel functions (hiring, firing, etc.) in conjunction with the Executive Director of Medical Management.

Writes and conducts annual and interim performance appraisal reviews for the professional and non-professional staff in the department.

Acts as liaison to facilitate communication and collaboration between all care partners (physicians, hospitalists, community care managers, nurses, community resources, etc.)

Responsible for leading a high-performance team of "system thinkers" who incorporate leadership principles and vision in performing the functions of case management.

Uses data to drive decisions, plan, and implement performance improvement strategies for case management.

Oversees the education of physicians, managers, staff, patients, and families related to the case management process at the local level.

Participates in this evolutionary process by constantly identifying the future needs of current customers and/or identifying potential new customers.

Ensures safe care to patients, staff, and visitors; adheres to all Memorial Hermann policies, procedures, and standards within budgetary specifications including time management, supply management, productivity, and quality of service.

Promotes individual professional growth and development by meeting requirements for mandatory/continuing education and skills competency; supports department-based goals that contribute to the success of the organization; serves as preceptor, mentor, and resource to less experienced staff.

Demonstrates commitment to caring for every member of our community by creating compassionate and personalized experiences.

Models Memorial Hermann's service standards by providing safe, caring, personalized, and efficient experiences to patients and colleagues.

Other duties as assigned.

No visa sponsorships supported

Travel not required

Requirements

Minimum Qualifications

Education: Bachelor of Nursing (BSN) or Masters Social Work (MSW);
Masters degree preferred

Licenses/Certifications:

Current and valid license to practice as a Registered Nurse in the state of
Texas or

A current and valid Texas license as a Master's Social Worker (LMSW),
required

LCSW preferred and Certified Case Manager (CCM), Accredited Case
Manager (ACM) or

Fellowship of the American Academy of Case Management (FAACM),
required

Location

Houston, Texas 77089

Profession

Registered Nurse

Specialty

Case Manager / Utilization Review

Employment Type

Permanent

Employer

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