

**DEPARTMENT OF HEALTH
NURSING CARE QUALITY ASSURANCE COMMISSION**

WHPS Procedure Summary 7.01: Case Management

Case Management is the hub of the program wheel receiving information from multiple sources such as: Treatment providers, employers, legal services, and licensing. The Case Management Team utilizes this information to develop individualized program participation contracts, substantiate compliance and recovery status, and protect public safety.

The intent of case management is to consider individual circumstances while monitoring nurses per applicable statute and regulation, Washington Health Professional Services (WHPS) procedures and contract requirements.

SUMMARY

1. Case Management

- A. Case Management Teams consist of a Case Manager and a Case Manager Associate. Case Management Teams serve as the point of contact for work site monitors, peer support group facilitators, Nursing Care Quality Assurance Commission (NCQAC), and other stakeholders.
- B. The Case Manager will meet (telephone may be acceptable in some instances) with all nurses prior to signing their contract in order to explain contract/program requirements and answer any questions.
- C. All communications from nurses (telephone, e-mail, mail, etc.) will be returned within 24 hours or the next business day.
- D. Case management monitoring activities include, but are not limited to, routine reviews and appropriate action on the following:
 - Overall contract compliance.
 - Monthly submission of Self-reports.
 - Monthly submission of Self-help group attendance records.
 - Monthly submission of Work-Site Monitor Evaluation reports.
 - Weekly submission of peer support group facilitator reports.
 - Monthly submission of treatment reports.
 - Employment requests, changes in worksite monitor requests and approval.
 - Following practice restrictions, specifically listed in employment contracts.
 - Initial and quarterly prescription information forms.
 - Daily alerts and follow up for laboratory drug screening results.

E. Case management teams check all alerts throughout the day, and follow up as necessary.

F. Case staffing meetings are held weekly and as necessary.

2. Contract Non-Compliance

A. Non-compliance with contract components requires nurse notification and action. In most situations, nurses will be given the opportunity to become compliant and will be informed of specific expectations and any consequences, i.e., contract extension, increase in test frequency, face to face meeting with case manager.