#### SERVICE POSITION DESCRIPTION

Please complete one service position description for EACH member you are requesting, using this template. The service position description is used in the recruitment and matching process. Each service position description must be sent electronically to complete an application.

**HOST SITE NAME & LOCATION: Nationalities Service Center** 

MEMBER POSITION/TITLE: CLINIC LIAISON

#### SITE SUPERVISOR ASSIGNED TO SUPPORT MEMBER:

Please include, name, title, phone number, email address and fax number.

Jess Nambudiri, Lead Health Case Manager, 215-893-8400, jnambudiri@nscphila.org, fax 215-735-9718

#### SITE CONSIDERATIONS

Is the site accessible via public transportation (if yes, what line/route)?: Yes. El, Trolley routes, bus routes

Does this position require a personal vehicle? No

How will your organization reimburse the member for transportation costs? Yes

Organization dress code: Casual

Expected service schedule: Monday to Friday, 8:30am to 4:30pm

**ORGANIZATION DESCRIPTION & MISSION:** Here at Nationalities Service Center (NSC), we believe that immigrants and refugees are a critical part of the fabric of life in the United States, and it is our vision that all immigrants and refugees achieve a life of dignity, safety, stability, sustainable opportunities and meaningful connections to their communities. To this end, NSC provides comprehensive services to immigrants and refugees, including legal protections, community integration, access to health and wellness services, and opportunities to achieve English language proficiency. Our dedicated staff are committed to ensuring that each of our clients receives high-quality holistic care and work together to refer clients to internal and external services based on the individual's needs.

Mission: Nationalities Service Center prepares and empowers immigrants and refugees in the Philadelphia region to transcend challenging circumstances by providing comprehensive client-centered services to build a solid foundation for a self-sustaining and dignified future.

#### **MEMBER ROLE:**

Describe the specific program(s), project(s), or initiative(s) that the member will serve with? What will the member's specific role be with this program/project/initiative? How will the member's primary activities align with the NHC's performance measures?

Between 1983 and 2004, 33,000 refugees were resettled in the Delaware Valley. Currently, three local resettlement agencies (Nationalities Service Center, Lutheran Children and Family Services and Hebrew Immigrant Aid Society) are resettling approximately 800 refugees to the region each year. Refugees typically come from many years of living in refugee camps or urban slums with limited access to health care, food, clean water, and basic hygiene. Many refugees arrive with unmanaged chronic health conditions and/or infectious diseases. Refugees also experience emotional trauma resulting from war, displacement and loss of loved ones and status; and are frequently diagnosed with post-traumatic stress disorder and other mental health conditions. In recent years, incoming refugee groups have included Bhutanese, Burmese, Congolese, Cuban, Eritrean and Iraqi and Syria populations. These groups live throughout the city of Philadelphia with the majority of newly arrived refugees living in Southeast Philadelphia and lower Northeast Philadelphia and Point Breeze.

According to federal protocol, refugees must obtain a domestic health screening (immunizations and screening for TB, infectious diseases, parasites) and orientation to the U.S. health care system within 30 days of arrival. Up until 8 years ago, Area resettlement agencies have long struggled to find health care providers with the cultural competence and knowledge of refugee health needed to provide high quality screenings and ongoing care. In the past, resettlement agencies employed an ad-hoc system of referring refugees to local private physicians and public health centers. Locally health centers are so overburdened that it can take months to secure a screening appointment. Additionally, there has been an increase in the arrival of medically complex cases in recent years, including refugees with chronic health conditions, malnutrition, physical disabilities (such as injuries from war or torture), and mental illness. For example, 20% of the refugees resettled in Philadelphia in 2010 had significant medical conditions requiring ongoing specialist care and/or surgery/hospitalization. These included: systemic lupus, pediatric spinal cord injuries, beta major thalassemia, coronary artery disease and rheumatic heart disease, hepatitis B and C, major depressive disorder, post-traumatic stress disorder, hypertension, diabetes, asthma, and thyroid disease.

In September 2010, Nationalities Service Center spearheaded the formation of the Philadelphia Refugee Health Collaborative (PRHC) in The PRHC is a regional coalition of Philadelphia's resettlement agencies and refugee health providers. PRHC's core mission is to create an equitable system of refugee health care in the Philadelphia region that ensures a consistently high standard of care for all refugees. The primary aims of PRHC are: (1) to ensure that refugees resettled in the Philadelphia area have timely access to a network of primary and specialist care providers with the capacity to effectively address their complex physical and mental health needs; and 2) to improve health

outcomes among refugee communities by implementing a community health education program.

All PRHC clinics are closely coordinated between a resettlement agency and clinical staff. The key components of the model are: 1) medical provider hosts a regular clinic for refugees; 2) clinic is housed in a university health system or community based provider providing access to a network of specialty practices; 3) clinic provides opportunities for residents, physicians and NPS to gain skills in global health and cultural competency; 4) A field liaison from the resettlement agency functions as an on-site Coordinator; and 5) clinic provides comprehensive screening, immediate attention to chronic/acute needs and long term medical care.

For newly arrived refugees, navigating the complex American health care system with limited English proficiency and limited understanding of the insurance and other systems is a difficult task. Access to these screening and specialist appointments would not be possible without education and support from an agency like NSC. Prior to the initiation of the Collaborative, resettlement directors estimated that about 30-40% of their staff time was dedicated to health access, questions and emergencies. Though health is an important aspect of refugee integration, there are many other areas of focus for resettlement staff including home and cultural orientation, employment and education, and finances and budgeting among others. The disproportionate time spent on health was detrimental to the overall adjustment and integration process. With the establishment of the Collaborative and funding to support refugee health in Philadelphia, resettlement staff are able to focus on these other areas while dedicated refugee health including at each resettlement agency provide education and individual support to refugees.

NSC's partnership with the AmeriCorps' National Health Corps (NHC) program and the inclusion of NHC Philadelphia members in this network of support further increases the quantity and quality of services provided to incoming refugees. 1) Escort to initial screening appointments and serve as a liaison between clinics and refugee patients. 2) Schedule and Escort to specialist appointments and 3) Members provide health orientations and other health education sessions, and answer questions for newly arrived refugees. 4) Provide case support for newly arrived refugees. Members serve as "Clinic Liaisons" to each of the refugee health clinics providing on-site assistance during the weekly clinic to address registration problems, schedule follow-up testing and specialist appointments, and help patients to fill prescriptions. All of these activities are aligned under NHC's performance measures. Additionally, NSC proposes a continued focus on health education activities in the coming program year incorporating measures such as chronic disease prevention and disease self-management. The member will also continue to assist refugee's post-resettlement by assisting with continuation of health insurance after the initial eight month Refugee Medical Assistance timeframe. By providing individualized attention to each incoming refugee's health, NSC is able to expedite client's connection to education and employment. Furthermore by providing a mix of targeted education, hands-on escorting and answers to questions and concerns, refugees are able to successfully navigate the complex health care system within a few months of arrival.

PROGRAM OR PROJECT NAME (INCLUDE % TIME OVER TERM MEMBER WILL SPEND WITH THIS PROGRAM)	MEMBER ACTIVITIES (List the key activities the member will be responsible for, for each program/project listed)	MEMBER OUTPUTS (How many classes, workshops, clients, patients etc. will the member conduct/serve under each activity)	NHC PERFORMANCE MEASURE(S) THIS ACTIVITY FALLS UNDER (if any).
Clinic Liaison (40% of time)	The member will function as the Clinic Liaison for the refugee clinic's such as Nemours, Jefferson, PHMC Health Connections and GPHA Southeast Health Center. Member will:  • Assist new patients with registration  • Coordinate follow up care in conjunction with other refugee health clinic staff.  • Provide direct assistance to refugees to teach them how to navigate the health care system e.g. how to access transportation to the clinic, fill prescriptions at a local pharmacy, and schedule sick visits at their primary care office.	<ul> <li>Member will register and escort 250 refug ees to domestic health screening appointments, including how to navigate the health care system.</li> <li>Member will provide social service navigation services to 25 refugees.</li> </ul>	<ul> <li>Deliver Information about Health Insurance, Health Access, and Health Benefits Programs</li> <li>Health Care Service Enrollment and Scheduling</li> <li>Primary Health Care Service Use</li> <li>Social Service Navigation</li> </ul>
Management of Specialist and Follow Up Care (40% of time)	<ul> <li>Member will schedule and accompany newly arrived refugees for follow-up testing (ie, x-rays) and specialist appointments following primary care visit.</li> <li>Member will schedule and accompany newly arrived refugees in accessing preventive care including mammograms</li> </ul>	<ul> <li>Member will schedule and escort 150 refug ees to specialist and/or follow up testing.</li> <li>Member will provide social service</li> </ul>	<ul> <li>Health Care Service         Enrollment and         Scheduling</li> <li>Preventative Health Care         Service Use</li> <li>Social Service Navigation</li> </ul>

Health Education (15% of time)  • Member will schedule all newly arrived refugees for a comprehensive health orientation.  • Member will provide health orientation to newly arrived refugees.  • Member will provide follow up health orientation to newly arrived refugees who arrived six months previous; assess gaps in health information among refugee communities.  • In partnership with the Refugee Health Coordinator, member will develop relevant health education interventions to provide to clients.  • Member will orient and support 3 nonmember volunteers (NMV) to provide assistance with escorting patients to follow-up testing and specialist appointments, including working alongside Coordinator to train and orient NMVs and assigning tasks to NMVs as appropriate.  • Member will the ducation interventions to follow-up testing and specialist appointments, including working alongside Coordinator to train and orient NMVs and assigning tasks to NMVs as appropriate.  • Member will the ducation interventions to follow-up testing and specialist appointments, including working alongside Coordinator to train and orient NMVs and assigning tasks to NMVs as appropriate.  • Member will the ducation interventions to follow-up testing and specialist appointments, including working alongside Coordinator to train and orient NMVs and assigning tasks to NMVs as appropriate.  • Member will provide 60 initia I health access, and Health Benefits Programs — Health Education: Disease sespoint orientation of exercises.  • Member will provide 60 initia I health norientation orientation orientation orientation orientation seasons to adult refugees.  • Member will provide 50 disea se sepcific orientations (ie, diabetes, weight management and cholesterol).  • Member will school follow-up testing and support 3 nonmember volunteers.  • Member will school follow-up testing and support 3 nonmember volunteers.  • Member will school follow-up testing and support 3 nonmember volunteers.  • Non-Member Volunteer Recruitment and Management volunteers.		<ul> <li>and blood tests.</li> <li>Refer clients with high medical need to Medical Support Services program.</li> </ul>	navigation services to 25 refugees.			
member volunteers (NMV) to provide support 3 non- assistance with escorting patients to member volunteers.  follow-up testing and specialist volunteers.  appointments, including working alongside Coordinator to train and orient NMVs and assigning tasks to NMVs as appropriate.  Please complete this section to describe the type of individual best suited to fulfill the service description and who will serve most effectively within your organization	Health Education (15% of time)	<ul> <li>refugees for a comprehensive health orientation.</li> <li>Member will provide health orientation to newly arrived refugees.</li> <li>Member will provide follow up health orientation to refugees who arrived six months previous; assess gaps in health information among refugee communities.</li> <li>In partnership with the Refugee Health Coordinator, member will develop relevant health education interventions</li> </ul>	provide 60 initia I health orientation sessions to adult refugees. • Member will provide 50 disea se specific orientations (ie, diabetes, weight management and	Health Insurance, Health Access, and Health Benefits Programs  Health Education: Disease		
within your organization	,	member volunteers (NMV) to provide assistance with escorting patients to follow-up testing and specialist appointments, including working alongside Coordinator to train and orient NMVs and assigning tasks to NMVs as appropriate.	support 3 non- member volunteers.	Recruitment and Management		
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- Excellent oral and written communication skills
- Ability to develop effective working relationships with clients and colleagues from diverse backgrounds
- Ability to work independently
- Ability to solve problems creatively and bring a can-do attitude to the team
- Excellent computer skills including basic knowledge of Word, Excel and data entry
- Experience working with ethnic and racial minority communities and other vulnerable children and adults
- Familiarity with community resources or ability to engage needed resources
- Health outreach, health education and/or case management experience preferred

### Please list the skills and/or experience that will help a member succeed in this position (e.g. customer service, language skills).

- Diligent and hard-working
- Problem-solver "able to think on feet"
- Compassionate, patient and friendly
- Flexible and adaptable

### What types of training will you provide to the member to support them in successfully completing their service activities?

- Refugee Resettlement: overseas processing and the US refugee program
- Introduction to Nationalities Service Center: History and current programs and services
- Overview of the Philadelphia Refugee Health Collaborative
- Cultural Orientation: Orientation to the primary ethnic groups arriving in Philadelphia
- How to work effectively with Limited English Proficient (LEP) clients
- The Clinic Liaison Role: Working effectively with clinical partners
- Orientation to Philadelphia resources (e.g. health care provider, social service programs)
- Internal systems and procedures for managing refugee health services (e.g. databases, case records, relevant policies)
- Procedure to complete time sheets and performance measures as well as schedule for weekly team meetings and supervision
- Introduction to relevant staff and description of other resettlement programs including case managers, clinic partners, interns and volunteers