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| Name: | Maryna Helmick |
| Phone: | 469 556-9882 |
| Email: | marynahelmick@yahoo.com |
| Location: | US-TX-Dallas-75231 (GCH) |
| Last Modified: | 10/14/2019 12:06:16 PM |

 Work History

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| Company Name: | NYS Home Health | 10/01/2018 - Present |
| Job Title: | RN- Case Manager/Admission Specialist | |
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| Company Name: | Dallas Omni Care | 11/01/2016 - Present |
| Job Title: | RN- Charge Nurse | |
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| Company Name: | Abacus Home Care | 10/01/2016 - 10/31/2017 |
| Job Title: | RN Case Manager | |
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| Company Name: | NYS Home Health | 05/01/2014 - 09/30/2016 |
| Job Title: | RN Case Manager | |
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| Company Name: | LVN NYS Home Health | 04/01/2013 - 05/01/2014 |
| Job Title: | Field Nurse | |
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| Company Name: | LVN Texas Masonic Retirement Center | 04/01/2010 - 04/01/2013 |
| Job Title: | Charge Nurse | |
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 Education

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| School: | Breckinridge School of Nursing, ITT Tech - Richardson, TX | Graduation Date: |  |
| Major: |  | | |
| Degree: | Associate Degree | | |
| School: | Dallas Nursing Institute - Dallas, TX | Graduation Date: |  |
| Major: |  | | |
| Degree: | None | | |
| School: | Institute of Economic Development; Kharkov | Graduation Date: |  |
| Major: |  | | |
| Degree: | Master's Degree | | |

 Additional Skills And Qualifications

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| Recent Job Title: | RN- Case Manager/Admission Specialist | Recent Wage: | 0 per |
| Security Clearance: | No |  |  |

 Desired Position

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| Desired Wage: | per | Desired Employment Type: |  |
| Desired Travel: |  | Desired commute: |  |
| Desired Relocation: | No | |  |

 Resume

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| MARYNA HELMICK 1110 Horizon Trail, Richardson, TX, 75081  Registered Nurse-TX-#RN864647, expires 08/20/2019, Richardson, TX 75081 \* Cell: 469-556-9882 marynahelmick@yahoo.com   Professional Summary  Job Objective: RN with 9 years of nursing and 5+ years of Case manager experience with strong background in clinical and home health settings, ability to assess and evaluate new patients, analyze their problems, and develop plans of care, seeking a challenging health care center position, where exceptional combination of theoretical and clinical skills is required to effectively perform the standard nursing procedure of assessing, planning, implementing, and reviewing patients care plan using holistic approach.  Skills  \* \* Ability to understand the business and financial aspect of case management \* Expert in Outcome and assessment information set (OASIS) \* Computer/typing proficiency to enter/retrieve data in electronic clinical record \* Experience with e-mail, internet research, and other software applications \* Data management \* Substantial Wound Vac experience including numerous complex cases Client assessment and analysis \* Strong problem - solving skills \* Ability to work independently \* Conflict resolution \* Excellent organizational skills \* Ability to multi-task \* Proven leadership capabilities \* Strong interpersonal/verbal communication and presentation skills, effective communicator with geriatric patients and families \* Excellent written communication skills \* Customer service skills     Work History  RN- Case Manager/Admission Specialist, 10/2018 to present NYS Home Health \* Conduct evaluation and information visits to the patients and their families, obtain consents, election forms, perform an initial comprehensive physical assessment \* Coordinate the services of the home health with physicians for the most comprehensive patient care. Provide nursing care to all patients of all ages \* Develop individualized care plans to prevent disease exacerbation, improve outcomes, increase patient engagement in self-care, decrease risk status, and minimize hospital and ED utilization \* Utilize behavioral strategies help patients/families adopt healthy behaviors and improve self-care in chronic disease management. Promote self-management goals. \* Assist patients/families in navigating the health care system. Coordinate Specialty care, follow-up on test results and other care coordination needs. \* Ongoing evaluation and documentation of patient progress/ risk status \* Coordinate 50-60 cases per month, supervising staff of LVNs, CNAs, Physical, Occupational, Speech Therapists and Medical Social Workers \* Provide primary team contact with patients/families in wound care program \* Engage with individual patients/families to provide educational and informational assistance regarding wound related issues \* Hands-on treatment of patients with chronic wound related issues  RN- Charge Nurse, 11/2016 to present Dallas Omni Care \* Develop and execute individualized care plans to prevent disease exacerbation, improve outcomes, increase patient engagement in self-care, decrease risk status, and minimize hospital and ED utilization \* Conduct comprehensive assessment of patients' physical, mental, and psychosocial needs \* Utilize behavioral strategies help patients/families adopt healthy behaviors and improve self-care in chronic disease management. Promote self-management goals. \* Ongoing evaluation and documentation of patient progress/ risk status \* Engage with individual patients/families to provide educational and informational assistance regarding wound related issues \* Hands-on treatment of patients with chronic wound related issues \* Represent the company during the state evaluations and oversee yearly inspections.  RN Case Manager, 10/2016 to 10/2017 Abacus Home Care \* Conduct comprehensive assessment of patients' physical, mental, and psychosocial needs \* Develop individualized care plans to prevent disease exacerbation, improve outcomes, increase patient engagement in self-care, decrease risk status, and minimize hospital and ED utilization \* Utilize behavioral strategies help patients/families adopt healthy behaviors and improve self-care in chronic disease management. Promote self-management goals. \* Assist patients/families in navigating the health care system. Coordinate Specialty care, follow-up on test results and other care coordination needs. \* Follow-up with patients/families within 24 hours on inpatient discharge &amp; within 48 hours of ED visit notification \* Ongoing evaluation and documentation of patient progress/ risk status \* Coordinate and manage 30-40 cases per month, supervising staff of LVNs, CNAs, Physical, Occupational, Speech Therapists and Medical Social Workers \* Provide primary team contact with patients/families in wound care program \* Engage with individual patients/families to provide educational and informational assistance regarding wound related issues \* Hands-on treatment of patients with chronic wound related issues   RN Case Manager, 05/2014 to 09/2016 NYS Home Health \* Managed and supervised staff of 2 LVNs and 1 CNA maintaining average caseload of 30-35 patients weekly. \* Monitored therapeutic services with average caseload of 30-35 patients in Dallas area. \* Admitted at least 15-20 patients weekly providing thorough physical assessment and analyzing history of current and previous illness(es) while caring for at least 4 patients with wound care, urostomy or colostomy. \* Developed a care plan which establishes goals, based on nursing diagnosis and incorporating therapeutic, preventive, and rehabilitative nursing actions. \* Monitored medication administration and treatments as prescribed by the physician. \* Educated patient and family on use of high risk medications (opioids, narcotics, antidepressants, anticonvulsants), side effects and adverse reaction. \* Prevented unnecessary hospital admissions by increasing frequency of visits and personal visits the first two weeks post hospital discharge or as needed.   Field Nurse, 04/2013 to 05/2014 LVN NYS Home Health  Charge Nurse, 04/2010 to 04/2013 LVN Texas Masonic Retirement Center  Education Associate of Science: Nursing, 2014 Breckinridge School of Nursing, ITT Tech - Richardson, TX- Registered Nurse  Dallas Nursing Institute - Dallas, TX, 2010 Licensed Vocational Nurse   MBA: Management, May 20, 1999 Institute of Economic Development, Masters Degree - Kharkov Master's Degree in Management   Awards  Honor Student Breckinridge School of Nursing, May 20, 2014 |