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AKA helps and empowers people to live life after a devastating, traumatic injury. We promise to listen, nurture and guide as their happiness and wellbeing underpins everything we do. We focus on practical and emotional support in the community and drive the industry for consistently high standards of performance and professionalism.

## **Jane Hammond-Hawkins MSc (PG. Dip. Ed.), MSc (Nursing), RGN Case Manager**

**Based in:** Preston, Lancashire

**Expertise:** Adults and children with acquired brain injury, spinal injuries, orthopaedic injuries and amputees and those with sensory deficits such as loss of vision and hearing.

### **Case Manager (2008 – present)**

Working with AKA Case Management Limited to provide a collaborative service that assesses, plans, implements, monitors and evaluates support options and services that meet the unique needs of a person who has suffered traumatic injury.

Examples of my previous case's include:

- A 28-year-old male who was involved in a workplace accident, resulting in the requirement for a below knee amputation and developing PTSD. I undertook an initial needs assessment and devised a case management plan that addressed all aspects of his daily living and rehab needs. I formed part of an MDT with the solicitor, occupational therapist, prosthetic specialist, and psychologist, ensuring that their goals were relevant and rehab focussed. My client now has a range of suitable prosthetics which enable him to undertake activities with his family such as swimming and running and allows him to continue his hobby of motocross sport. I am currently assisting my client to purchase a suitable property and along with the OT, make suitable adaptations to future proof this accommodation.
- A 20-year-old female who suffered a traumatic brain injury as a pedestrian when she was 7 years old. I was asked to take this case on as my client had experienced a poor service from a previous case manager and no suitable rehabilitation had occurred. I have now worked with this client for 7 years and have managed to progress her rehabilitation by sourcing suitable therapists. After much struggling with various social work departments, funding has been agreed for a suitable package of care that promotes my clients independence. The MDT have provided suitable training for the specialist support workers and this has enabled my client to manage her challenging behaviour patterns appropriately. She no longer has incidents which require police intervention and she is safeguarded by the interventions provided by the MDT. My client has been assisted to live independently from her family and the focus is now on vocational aspects.

### Qualifications

- State Registered Nurse, Royal Free Hospital, London (1982)
- BSc Health Studies (Nursing) at University of Huddersfield (1995)
- MSc Health Professional Education (PG. Dip. Ed) at University of Huddersfield (2005)
- Managing children and young people with a brain injury at University of Northampton (2013)
- ENB 176 Operating Department Nursing (1992)
- ENB 998 Training and assessing in practice (1992)
- NVQ assessor awards D32, D33 (2001)
- Remedial Camouflage NVQ level 2
- Primary Train the Trainer Award 2004
- National Wardens certificate from Institute of Housing (1987)

### Memberships

- The Royal College of Nursing
- Member of British Association of Brain Injury Case Managers
- Member of Spinal Injuries Association
- Nursing and Midwifery Council – RGN level 1 and Nurse Lecturer (7811991E)

### Most Recent Related Training

- British Sign Language level 1 award
- Medication competency training
- Attendance at NAIDEX, updated knowledge on available equipment and WAV's

### Recent Achievements

- Written and delivered a range of competency programmes designed for directly employed support workers, including administration of medications level 3, Management of diet and fluids via PEG, JEG Tubes and PICC lines, urinary catheterisations, and bladder management to include bladder washout, Use of NIPPY, Oro and Nasopharyngeal suctioning, Manual evacuation of faeces and bowel management.
- Reviewing directly employed care package delivery and identifying ways to improve the quality of the care.