

Award Nomination Form**Catastrophic Clinical Case Manager of the Year****Specific Award Criteria: Catastrophic Clinical Case Manager of the Year**
Nothing is impossible the words itself say "I'm possible"

CMSUK are looking for Case Managers who are outstanding in their field, having gone the extra mile to obtain outstanding outcomes for the client.

Nominations should outline the interventions organised/planned and their link to outcomes in the following areas: physical, emotional, psychological, social/spiritual and economic; and/or be related to a measurement of quality of life. Entries need to reflect on successful outcomes, learning and progress within your practice and overcoming challenges of the ever-evolving world around us.

- Nominations are accepted from the individual case manager, or from case manager's colleagues, or the Company where they work, or from others involved with the client including the client/family member, solicitor, insurer, employer or therapeutic service provider. Where the nomination comes from someone other than the case manager, the nominated case manager must be made aware in order to complete the case reflection.
- All nominees must be a current CMSUK Case Manager or Associate member at the date nominations are invited.
- Nominations should provide clear evidence of a planned care/support or goal orientated approach, measurable outcomes and evidence-based practice.
- Nominations must also include a reflective piece on **Nothing is impossible the words itself say "I'm possible"**
- Nominations should be no more than 1200 words and can take the format of a case study or narrative description.
- The nomination and supporting testimonials must clearly evidence application up to 3 of the CMSUK Standards of Practice (Part 2). **For equity of judging, you must only tick the 3 standards that best represent / support your nomination.**

Generic Award Criteria:

- All nominations must conform with data protection and information provided without consent from the persons involved must be recorded in a way that no injured person (client) can be identified from the information.
- All nominations must be supported by testimonials which are extra to the reflective piece. Testimonials external to your own company carry more weight. Testimonials must be submitted in their raw format with details of the person providing the testimonial clearly visible (on email or letter with Company details and contact number visible). If testimonials are provided by a client, they are allowed to be anonymous. However, a telephone number is required and a member of the CMSUK Awards project team will make contact with them to verify their testimonial.
- Limit of no more than two entries per category from one organisation
- Please number all the pages of your nomination document and ensure each page, including any testimonials, has the Nominee name on.
- Please submit all of the above to: info@cmsuk.org
- Closing date for nominations is **Friday 7th June 2024**
- Finalist nominees and/or their testimonials will need to pre-record a 3-minute reflection video to be shared on the day and on the event page of our website after the event. The project team will contact finalists to make arrangements for these over the summer.
- All finalist nominees are required to attend the Awards Event on **Friday 13th September 2024**. In the event of this not being possible the finalist nominee will need to appoint a suitable proxy.



CMSUK 2024 Awards

Hilton London Tower Bridge

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13th September 2024

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Catastrophic Clinical Case Manager of the Year

Part 1: Nominator / Nominee details (may be the same person)

THE NOMINATOR Your details		THE NOMINEE The details of the person you are nominating	
Title:		Title:	
First Name:		First Name:	
Last Name:		Last Name:	
Job Title:		Job Title:	
Company:		Company:	
Address:		Address:	
Phone:		Phone:	
Email:		Email:	

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Part 2: Standards of Practice

Please ✓ the 3 standards that best represent / support your nomination.

(To view the full CMSUK Standards of Practice document, please go to the Policies & Documents page of the CMSUK website: www.cmsuk.org/about-cmsuk/policies-documents)

No:	Standard Title	Standard Description	✓
1.	Referral	Case managers should ensure that their clinical knowledge and case management experience match the needs of the individual being referred. They should also have a process to ensure sufficient capacity to meet the demands of the case in a timely manner.	
2.	Consent	Case managers should apply the 5 fundamental values of the Mental Capacity Act 2005 when taking a client's consent: <ul style="list-style-type: none"> • Capacity is to be presumed • Ensure decision making capacity is optimised • The lowest form of restriction is to be applied for those people who lack capacity • All actions to ensure 'best interests' are fundamental to all interventions for those who lack capacity • The right to make unwise decisions 	
3.	Assessment & Goal Setting	Assessment provides the foundation for effective intervention and it is crucial to undertake a thorough and reliable assessment at several stages during the case management process.	
4.	Intervention & Evaluation	Intervention is all the actions taken by the case manager on behalf of the service user. The process can include prioritising, planning, implementing, co-ordinating, monitoring and evaluating the options and services required to address agreed goals and promote quality cost effective outcomes. Intervention may be interpreted as the process of initiating, undertaking and co-ordinating activities with or on behalf of a service user in order to move them towards their stated goal.	
5.	Discharge, Closure or Transfer of Case	It is acknowledged that in any case management some service users will require ongoing services for the remainder of their lives, while others will, in the course of their rehabilitation, cease to require the services of a case manager. This standard confirms that for those people who will cease to require case management from your service, there will be discharge, closure, or transfer of the case to others (whether other case managers or other services).	
6.	Record Keeping	Record keeping – as either a case management record or part of a multidisciplinary record – is an essential and integral part of care. The purpose of the records is to give a comprehensive, accurate and justifiable account of the interventions, advice, care and support provided or planned for a service user. The information also supports the use of audit, evidence based clinical practice and improvements in clinical effectiveness through research.	
7.	Service Quality & Governance	It can be difficult for anyone commissioning services to monitor the quality and cost effectiveness of the service they receive. The principles of quality and governance apply equally to all case managers, in all settings. Individual practitioners and services have a duty to provide case management of the highest competence, safety, quality and value, personalised to a service user's individual needs. See also the Standards on The Case Manager as Practitioner (14) and Business Practice (15).	
8.	Professional Development/Lifelong Learning	Continuing personal and professional development (CPD) and lifelong learning for all members ensures the competence required to provide safe, efficient and effective services which meet clients' expectations and support best practice. Effective CPD should be: Continuous - occurring throughout the practitioner's working life Professional - required for the delivery of services involving technical skill, quality and professionalism Broad based - development of personal skills, knowledge and qualities Structured - systematic maintenance, improvement and broadening	
9.	Fieldwork Education	Case managers are encouraged to provide practice education opportunities for trainee case managers, to ensure a future workforce and to promote a learning culture within the workplace. It is acknowledged that case management courses are developing, and this standard will become more applicable.	

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10.	Safe Working Practice	Health and safety law puts a duty on employers to ensure the health, safety and welfare of their employees, so far as is reasonable. Employees have a duty to care for their own health and safety, and to care for the health and safety of those who may be affected by what they do. These duties, under the Health and Safety at Work Act 1974 and the Management of Health and Safety at Work Regulations (1999), also apply to lone workers. Case managers may wish to base any comprehensive risk assessment on the Five Steps to Risk Assessment of the Health and Safety Executive (2006). Case managers therefore have a duty to assess risk to themselves and in their own environment, and risks associated with their clients.	
11.	Research Ethics	The conduct and ethics of research in the NHS has become subject to a range of standards, which are applicable in independent practice. Research governance frameworks for health and social care in the United Kingdom have been published. Legislation and guidance documents form part of the framework acknowledging public concern about health research and issues around informed consent. Case managers should not undertake any research without appropriate ethical committee approval and research governance.	
12.	People Who Provide Support & Assistance	In meeting the needs of the client, case managers draw upon the resources of people who provide support and assistance. This may be in a professional, voluntary or familial capacity. The term “carer” is often used to describe people who undertake a variety of activities, but this is frequently thought to mean physical or personal assistance. Hence, the term “people who provide support and assistance” is used here to encapsulate and include everyone who contributes physical, emotional, psychological and social support and assistance to a service user.	
13.	Service User Protection	This standard identifies aspects that need to be addressed to ensure that services that the case manager provides are as safe as possible. Vulnerable adults and children are particularly susceptible to abuse for many different reasons ranging from dependency on others for personal care to difficulties in communication.	
14.	The Case Manager as Practitioner	The case manager must protect the health and well-being of people who use their services. This means that the case manager must always keep high standards of conduct, behaviour, performance, competence and ethics.	
15.	Business Practice	Many case managers work in independent practice rather than in the statutory sectors. These recommendations seek to help those case managers who are either self-employed or working within a case management company to achieve and maintain good business practice.	



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Part 3: 1200 word nomination

In the format of a case study or description, including nominee's reflection on **Nothing is impossible the words itself say "I'm possible"**

Please send testimonials as email attachments (in plain text), do not insert as images.



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Part 4: Tie Breaker.

Due to the continue high calibre of entries for the CMSUK Awards, this year we are introducing a Tie Breaker Summary. If two entries are equally scored, the Chair of the Awards Committee will review the Judges scoring, and then score the Tie Breaker Summary against the same criteria to decide the winner.

The Tie Breaker Summary of 'How you have exceeded achieving the impossible' should be no more than 250 words (up to 250 words only will be reviewed).

Part 5: Testimonials.

All nominations should be supported by testimonials (no more than 2) which are extra to any applicable word count above.

Testimonials must be submitted in their raw format with details of the person providing the testimonial clearly visible (on email or letter with Company details and contact number visible). If testimonials are provided by a client, they are allowed to be anonymous. However, a telephone number is required and a member of the CMSUK Awards project team will make contact with them to verify their testimonial.

No testimonial will be considered without contact information being supplied below. Please send testimonials as email attachments (in plain text), do not insert as images.

1 st Additional Testimonial Contact Information		2 nd Additional Testimonial Contact Information	
Title:		Title:	
First Name:		First Name:	
Last Name:		Last Name:	
Job Title:		Job Title:	



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Company:		Company:	
Phone:		Phone:	
Email:		Email:	