

An Investigation to
Identify the need for a
Standardised, Accredited
or Certified Professional
Pathway for Case
Managers in the UK.

Commissioned by CMSUK
February 2012

Executive Summary

An investigation to identify the need for a standardised, accredited or certified professional pathway for case managers in the UK.

1. Introduction

Within a burgeoning case management industry, which is currently lacking regulation, the Case Management Society UK (CMSUK) aims to assure quality and equity of service delivery of case managers (both CMSUK members and others) by setting the highest benchmark of standards of practice and code of ethics.

In order to actively progress the aims of the organisation, CMSUK commissioned an investigation into the role of a standardised, accredited or certified professional pathway for case managers in the UK.

2. Background

This investigation aimed to address a gap in the evidence base with regard to professional recognition for case managers in the UK. Whilst there are several organisations, (e.g. CMSUK, British Association of Brain Injury Case Managers (BABICM), Vocational Rehabilitation Association (VRA)) supporting the professional practice and development of case managers in the UK, case management is not a recognised professional title in the UK. This is further exacerbated by the lack of a formal professional pathway.

A ‘professional pathway’ was defined as including relevant type and years of experience, prior knowledge and qualifications, specific practice skills and possibly personal attributes and qualities. However, without the underpinning of a specific ‘educational framework’ that may lead one towards the role of a case manager, there appeared to be no consistent mechanism for determining and measuring a case manager’s ability to take on this role and meet standards of practice .

3. Aim and Objectives

To enable CMSUK to make an informed decision about the most feasible and realistic professional pathway (with emphasis on an educational framework) the following objectives were agreed:

1. To explore the most feasible type/model of professional pathway for case managers
2. To identify the constituent parts of such a pathway
3. To explore options for implementation of such a pathway
4. Clarification of the type/level/content of an educational framework and what it could contribute to a professional pathway
5. Provided evidence of the impact of implementing a professional pathway on individual case managers and case management in the UK.

4. Methodology

Data was gathered by an online questionnaire and one focus group from a range of stakeholders who were either providers or commissioners of case management services in the UK.

5. Findings

5.1 Questionnaire

There were 159 final respondents to the questionnaire.

81.8% were providers of case management services and 21.4% were commissioners. 87.4% are working in the independent sector and 95% have a professional qualification. The majority have been providing case management services for between one and ten years and 3.2% for over twenty years.

5.1.2 A professional pathway for case managers

Respondents to the questionnaire supported professional recognition (87.4%), registration (97.4%) and professional qualification (89.3%) for case managers. There was less certainty about the need for a specific case management qualification with 43.7% disagreeing and 53% agreeing or strongly agreeing to this.

There appears to be less agreement over the need for standardised (78.9%), accredited (67.7%) or certified (77.3%) professional pathways for case managers.

For the content of a professional pathway the results show higher value placed on recognition of experience, holding a related professional qualification and assessing case management skills.

The highest emphasis is on recognition of previous experience (91.9%) and the lowest emphasis is on holding a relevant postgraduate qualification at Masters or PhD level (5.9%). A formal educational framework, while valued, is less important than other aspects.

The benefits of completing a professional pathway were seen as: registration with a professional body (80.7%), membership of a case management organisation (78.5%), and use of a professional title (78.5%), leading to more regulation, increased quality of service and professional credibility.

Potential disadvantages are seen as costs (financial and time), and not recognising experienced case managers' needs. There was indication for the need to be multi-disciplinary so as not to exclude some groups of case managers.

5.1.3 Educational framework

A formal educational framework should form part of a professional pathway for case managers (39% strongly agree, 43.9% agree). Responses to these aspects place emphasis on the recognition of case management skills as a key component. A post-graduate educational framework using mixed learning approaches, and of between 6-18 months duration, was favoured.

5.2 Focus Group

The focus group was a means of clarifying responses to the questionnaire and further exploring some key issues with regard to a professional pathway for case managers. Resultant from the focus group was the overarching question of 'What does the profession of case management look like?'

Analysis refined categories of data into four themes: models of case management practice, professional qualification, registration and partnership working (see Diagram 1.1)

Diagram 1.1 Four themes



6. Discussion

‘Identifying to what extent there is a need for a standardised, accredited or certified professional pathway for case managers in the UK.’

The results suggest that respondents of this investigation do identify a need for a recognised professional pathway for case managers, that includes an educational component. This includes having an existing professional qualification and being registered with a professional body that recognises case management as a separate profession. There is less clarity about the type of formal recognition (standardised, accredited or certified) and the need for a specific case management qualification.

6.1 The most feasible type/model of professional pathway for case managers

The results indicate that the majority of respondents would value a postgraduate, professional pathway that recognises:

- Level of practice
- Length of service
- Type of case management experience
- Measurable in relation to agreed case management standards
- Aim of increasing quality of provision

6.1.1 Type of model for case managers

The type of model chosen is dependent to some extent on two broad considerations: the inclusiveness of the definition of case management used and the specific requirements of a model for use in the UK context.

6.1.2 Professional qualification

The investigation provided strong support for case managers holding a professional qualification in a relevant background. In this case, case management becomes a role description following this initial qualification.

There was some evidence to support an approach that recognised different levels of competency that enabled practice of different/particular types of case management.

Although there was strong feeling about the professional level of case managers there was less support for a specific case management qualification. The emphasis is on formally evidencing their existing skills and experience to gain recognition and give credibility to their current practice, considering different needs for those new to the case management role and those who have much experience.

6.1.3 Partnership working

There is evidence to suggest that partnership working between case management organisations may be the most effective way of advancing changes. A partnership approach would support an inclusive definition of case management and enable a stronger voice when lobbying for the future development of case management services in the UK. The focus group emphasized the view that CMSUK and BABICM should retain a strong lead in moving this agenda forwards.

6.1.4 Registration issues

Focus on:

- Who would be able to register,
- What are they looking to register
- Which organisation would carry out the registration process?

Benefits of registration:

- Formal recognition
- Credibility to the role
- Aim of improving the quality of service to clients and commissioners

Key decisions:

- Registering a title or role description
- Recognising levels of experience
- Testing process
- Balance between educational component and evidencing practice

Disadvantages:

- Exclusion of some people

6.2 Identifying the constituent parts of a professional pathway

While a formal means of recognising experience, assessing case management skills and a professional qualification were highly regarded by experienced case managers those who are new to the role may have different views. Agreeing constituent parts of a professional pathway is therefore dependent on whether this pathway is developed for new or experienced case managers or both. A competency based approach does seem to be favoured even though this was not the initial focus of the investigation.

6.3 The type, level and content of an educational framework and what it could contribute to a professional pathway

There was lack of clarity about preferences for the components of an educational framework and what it would contribute to a professional pathway, with some suggestions (e.g. unique case manager skills, communication skills, legislation etc.), but less-defined priorities.

The difference between the needs of experienced and new practitioners is again highlighted here. However there does seem to be agreement about the need for a formal mechanism for evaluating case management practice against standards regardless of level and type of experience.

A formal means of assessing case management practice (whether academic or evidenced based) would be seen to contribute professional recognition, credibility and increased standards to a professional pathway.

There is some evidence to support a competency based approach but with an emphasis on flexibility of access, a mix of learning approaches and level of study to include a broad group.

6.4 The impact of implementing a professional pathway on individual case managers and case management in the UK

There is limited specific evidence that clearly demonstrates the impact of implementing a professional pathway.

For the individual case manager:

- Meeting the different needs of new and experienced case managers may influence (positively or negatively) the recruitment process
- Better clarity around their level of experience and formal recognition should enable commissioners and clients to choose the most appropriate person for their needs and to be clear about what they are receiving and to what level. This should impact positively on the quality of service provided – at least this would be the aim.

For case management services in the UK:

- The impact of working in partnership may increase the profile of case management as a profession and strengthen lobbying ability for further development of the role

7. Conclusions

Overall this investigation provides strong evidence in support of the need for a professional pathway that includes an educational framework. While there is less certainty about the need for a specific case management qualification this appears to be linked to the differing needs of new and more experienced case managers.

The details of who would be included in a professional pathway, which organisation would monitor it

and what would be the best model/approach require some further clarification.

The contribution of an educational framework is less clear but the preference for focusing on a formal means of evidencing existing practice against standards of practice is preferred.

A formal means of assessing case management practice (whether academic or evidenced based) would heighten the professional profile of case managers giving them increased credibility and improved standards of practice. Emphasis is on flexibility of access, a mix of learning approaches and level of study to include a broad group.

8. Recommendations

The recommendations below offer alternatives to enable CMSUK to make informed decisions about implementation of the findings from this investigation and thus furthering the professional recognition of case managers in the UK. To achieve implementation several key questions need addressing as follows:

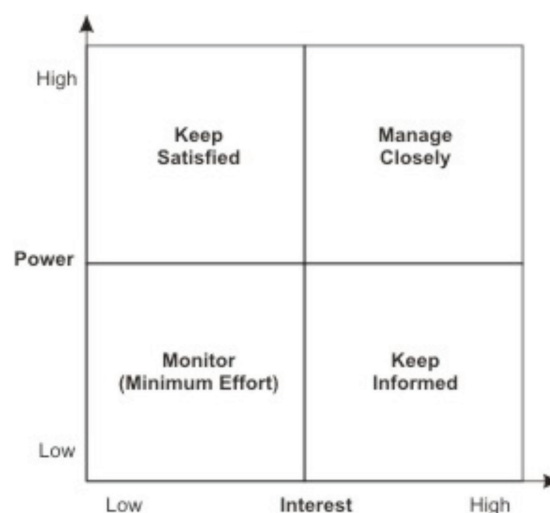
1. What is the most feasible and realistic model for implementing a professional pathway for case managers in the UK?

- Should a 'Best practice' approach be taken? – I.e. look at/evaluate models from other countries/ domains of work and choose the most favoured one to apply to UK (e.g. USA, Australia, ILM etc.)
- Should a 'Best fit' approach be taken? – I.e. look at/evaluate component parts of models from other countries/domains of work and create a model that fits the UK context – i.e. appreciating the socio-political context for practice.

2. What is the best strategy/process for implementation of the findings?

- Should CMSUK work in partnership with others to implement? Including; other case management organisations, commissioners, government, professional bodies, and other relevant stakeholders.
- If so, how would partnership arrangements be agreed? Including; clarity and equality in distribution of roles, resources, responsibilities, costs, timescales and tasks in taking this agenda forward.
- How would lobbying of key stakeholders be implemented? – e.g. Who are the key stake holders? What message do they want to get across? What is the best way of engaging with them? For the above points, use of a stakeholder mapping matrix may be useful (see below Figure 1).
- Should implementation be staged or implemented in full?

Figure 1 Stakeholder mapping matrix



Issues for further consideration in addressing these questions and some benefits and disadvantages are presented in Table 1.1

Table 1.1 Considerations for addressing key implementation questions

Issue of concern	Possible Benefits	Possible Disadvantages	Comments
Design a pathway for new case managers?	Clarity of role, definition, criteria from the outset	Exclude experienced case managers, costs – willingness to pay?	Who would accredit this training? What would it entitle them to? Need to agree criteria/content
Design a pathway for experienced case managers?	Recognises experience	Excludes those with less experience, costs. Requires them to provide evidence	Would need to consider: Who would accredit this ? What would it entitle them to? Need to agree criteria/content
Case managers should have a related professional qualification?	Gives recognised accredited status to the role. Helps to clarify distinct role of case manager	Excludes those without this qualification. May limit practice to certain professional/client groups	Who determines relevance/accepted qualifications
Case managers do not need a related professional qualification?	Broadens the definition of who is included in case management role - inclusive	May reduce clarity of role for clients/commissioners	How do you measure quality of practice?
Working in partnership with others?	Higher profile More ideas and creative thinking	Overcoming differences in thinking, time consuming	
Working alone	Easier to manage/co-ordinate and could take less time	Lower profile Could be seen as protectionist	
Decisions about whether to register the title, individual or role	Clarity of who is included, what their entitlement is etc.	Could be exclusive of some groups depending on what was registered and which organisation was responsible for this	Decide which organisation would register people. Consider benefits of each option
Focusing on needs of experienced case managers	Good body of knowledge. Evidenced base approach. Recognises experience	Excludes new or inexperienced	The level of experience of respondents will have a distinct impact on their wishes so it may be worth looking further at the needs of case managers with less experience and who do not have an existing professional qualification
Agree standards of practice against which to measure competence	Clarity of expectations and quality of service	Need to still agree what competencies and how to measure them. Could alienate some practitioners	Who would agree them and measure them?
Educational framework – evidence-based, academic route or both?			Look at models from other fields (ILM, Coaching) Consider having an evidence-based and an academic route, flexibility of learning approaches.

Issue of concern	Possible Benefits	Possible Disadvantages	Comments
Consider future of Case Management being recognised as a profession – how to achieve this – explore routes for this (HPC requirements for example)			Need to do more work on
Inclusive approach – include all (new and experienced, different types of case management) in model and implement	Does not alienate some people	Makes clarity of roles difficult	May need to consider different levels of practice and entitlement to different things
Staged approach – start with experienced and evidence-based approach and then evaluate and use as benchmark to roll out to other groups	Focuses on what is known and achievable. Could be used as benchmark for wider application later. Cost effective	May alienate some	Need to clarify long term and short term plans and objectives
Defining components of professional pathway – professional qualification, evidence etc.	Clarifies who it is aimed at, at what level etc.		Need to consider who sets standards and measures them and what achievement entitles them to

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1. Introduction

Within a burgeoning case management industry, which is currently lacking regulation, the Case Management Society UK (CMSUK) aims to assure quality and equity of service delivery of case managers (both CMSUK members and others) by setting the highest benchmark of standards of practice and code of ethics. CMSUK is committed to promoting and fully supporting its members in achieving such standards of practice and in proactively seeking to debate about the future professional recognition of case management.

In order to actively progress the aims of the organisation, CMSUK commissioned an investigation into the role of a standardised, accredited or certified professional pathway for case managers in the UK. The project report will first detail the background, aims, objectives and expected outcomes of the investigation and the methods used to gain information.

The findings from the investigation are then presented and discussed in relation to the objectives and outcomes. Recommendations to further the aims of the organisation are given. This report will be formally presented to the CMSUK Board and members of the Standards, Research and Development Working Group on the 1 March 2012.

2. Background

This investigation aimed to address a gap in the evidence base with regard to professional recognition for case managers in the UK. Whilst there are several organisations, (E.g. CMSUK, British Association of Brain Injury Case Managers (BABICM), Vocational Rehabilitation Association (VRA)) supporting the professional practice and development of case managers in the UK, case management is not a recognised professional title in the UK. This is further exacerbated by the lack of a formal professional pathway. The underlying assumption of this investigation was that a professional pathway is an integral part of professional recognition. Within the confines of this investigation, a ‘professional pathway’ was defined as including a number of elements such as relevant type and years of experience, prior knowledge and qualifications, specific practice skills and possibly personal attributes and qualities. However, without the underpinning of a specific educational framework that may lead one towards the role of a case manager, there appeared to be no consistent mechanism for determining and measuring a case manager’s ability to take on this role and meet standards of practice .

An ‘educational framework’ was seen as including any form of training and education that provides specific, acceptable, and common information and knowledge immediately relevant to the role of case manager that can be measured against recognised educational/practice standards.

Anecdotal evidence (and our findings) seem to suggest that many (but not all) case managers in the UK have a professional qualification and are thus required to meet ethical codes of practice and standards in accordance with their regulatory bodies. A professional qualification as used in this investigation referred to *‘any existing qualification, achieved through a recognised educational programme that entitles the holder to register with a relevant professional body and to practice using a protected professional title. This qualification could be in any field relevant to their case management role’*. In addition it was recognised that case managers would have a wide variety of other skills and experience related to the client group with whom they work and the case management role. However, there appeared to be no formal, uniform mechanism for identifying and developing both case managers’ specialist knowledge for responding to the different and complex needs presented by clients and knowledge/skills relevant to performing the case management role.

Recent debate in the UK case management field (and specifically within CMSUK) has focused

on whether there is a need for a professional pathway to address this gap in provision. If there is, further questions need to be addressed concerning the most feasible model, its implementation and implications for individual case managers, the wider case management industry and those commissioning case management services. This debate takes place against a background of varying definitions of case management and a wide range of professional backgrounds of individuals taking on case management roles. The findings from this investigation provide further evidence for the need to address some of these key issues.

The background to the development of case management services across international boundaries (notably in the USA) provides historical evidence and examples of differing roles, specialties and professional boundaries of case managers. Different models of regulation and training are also presented. For example, in the USA, regulation and training are linked and there are formal processes of certification, which case managers can access to demonstrate their level of education, skills and expertise (CCMC 2011). There is however continued debate and varying views of standard setting for case managers within different organisations (CCMC 2011).

While there are a number of existing training providers in the UK that offer development for case managers, there is no formally recognised regulatory body to monitor quality of case management practice and ensure that the case manager possesses the relevant skills and experience to take on the role. Other UK case management organisations (BABICM and VRA) are also concerned with the content, level, method of delivery and gaps in the provision (Harvey 2010) and note that "...the amount of education and training available is substantially less than required to maintain standards..." (VRA 2006, P2). There is also evidence of training to support a case management role within statutory health services (Department of Health 2005a and Department of Health 2006).

Against this inconsistent background, sketching out the debates of professional recognition and development of case managers, the investigation aimed to gain evidence from a range of stakeholders in the case management field identifying some of the salient issues. Stakeholders were providers or commissioners of case management services with an interest in the quality of case management practice in the UK and spanned different professional backgrounds. Although the investigation was carried out on behalf of CMSUK, the outcomes, as detailed in this report, have implications for both CMSUK membership and the wider case management community. The findings, therefore, provide an impetus for further discussion with reference to the future of case management across professional boundaries.

For the purposes of the investigation 'case management' was defined in line with CMSUK's definition as *"a collaborative process which: assesses, plans, implements, co-ordinates, monitors and evaluates the options and services required to meet an individual's health, social care, educational and employment needs, using communication and available resources to promote quality cost effective outcomes."* (CMSUK 2011)

This definition encompasses a wide range of case managers with differing professional backgrounds, working across different client groups. This is representative of the generic membership of CMSUK as opposed to the focus on specific client groups in other case management organisations.

The terms 'Professional Pathway', 'Educational Framework', 'Standardised', 'Certified' and 'Accredited' were also defined to provide a consistent basis on which to explore the key concepts in the investigation.

A detailed exploration of the background and definitions used can be found in the Project Brief for the investigation which is available to download from the CMSUK website.

3. Aim, Objectives and Outcomes

Against the background for case management in the UK the specific aim of the investigation was: 'To identify to what extent there is a need for a standardised, accredited or certified professional pathway for case managers in the UK.'

To achieve this, the investigation addressed the following objectives:

1. To explore the most feasible type/model of professional pathway for case managers

2. To identify the constituent parts of such a pathway
3. To explore options for implementation of such a pathway
4. Clarification of the type/level/content of an educational framework and what it could contribute to a professional pathway
5. Provided evidence of the impact of implementing a professional pathway on individual case managers and case management in the UK

In achieving these aims and objectives and representing the views of key stakeholders the expected outcome of the investigation was to enable CMSUK to make an informed decision about the most feasible and realistic professional pathway for case managers in the UK. This would include the identification of the advantages of implementing such a pathway and identifying its constituent parts with particular emphasis on developing an educational framework.

4. Methodology

Both qualitative and quantitative data was gathered in order to address the investigation's aims and objectives. The data was gathered using two methods, namely an online questionnaire and one focus group. Participants were drawn from the CMSUK membership and its wider contact database, including other case management organisations and commissioners of services.

The questionnaire asked questions to specifically address the areas of concern expressed in the aims of the investigation. The focus group was an opportunity to confirm responses to the questionnaire and clarify key areas for further discussion and implementation.

The questionnaire was initially circulated to a sample of approximately 3000, including all of CMSUK's individual and Corporate Members. It was also sent to CMSUK's extended contacts list, the Association of Personal Injury Lawyers (APIL) list, the Working Party list from Sept 2010 study day, and additional contacts, who expressed an interest. After two months a reminder email was sent to the same recipients. The questionnaire was circulated also to the membership of BABICM and the VRA. Exact numbers of people captured through this method are difficult to calculate, due to the approach taken. There was an explicit bid to forward the request for participation in the survey and thus the reach of the questionnaire is difficult to determine.

Respondents to the questionnaire were also asked if they would be prepared to participate in a focus group/s should it be possible to organise them. One focus group, with 5 participants, was subsequently organised and took place at the CMSUK Annual Conference in November 2011.

The focus group conversations were transcribed and thematic analysis was carried out. The resultant themes encouraged further discussion and have been combined with the questionnaire findings to reach recommendations.

5. Findings

5.1 Questionnaire

There were 159 final respondents to the questionnaire; we did not eliminate questionnaires that were not fully completed. Whilst the number of respondents seems low, considering the nature of the investigation and the methods employed, generating responses in excess of 100 can be seen as a success.

5.1.1 Biographical data

Of the total respondents 81.8% were providers of case management services and 21.4% were commissioners. 7.5% indicated that they had a different role in case management including: supervisor/manager of case managers, team leader, consultant nurse or practice manager.

The breakdown of specific jobs within case management services is shown in Table 1.1.

The majority of respondents (87.4%) are working in the independent sector and 15.1% working in the public sector. A small percentage are working in either the third sector (5%) or other sectors such as consultancy, personal injury or across sector work (4.4%). The breakdown of their type of organisational background is shown in Table 1.2.

Respondents also indicated that they work with a wide range of clients as shown in Table 1.3. Those who indicated 'other' worked with a range of clients/conditions including: musculoskeletal, athletes and major incidents, i.e. coach crashes.

Ninety five per cent of respondents have a professional qualification; the majority being either nurses or occupational therapists (Table 1.4).

Table 1.1 Break down of specific jobs within case management services

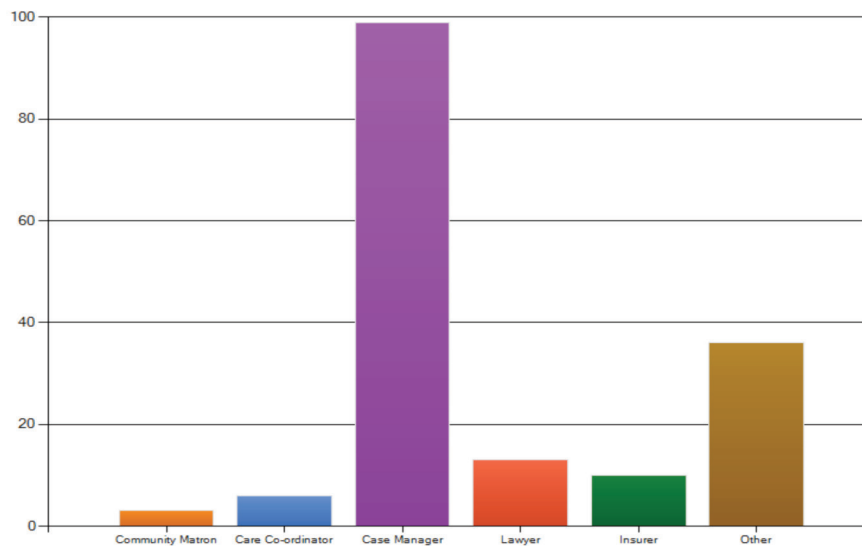


Table 1.2 Break down of type of organisation

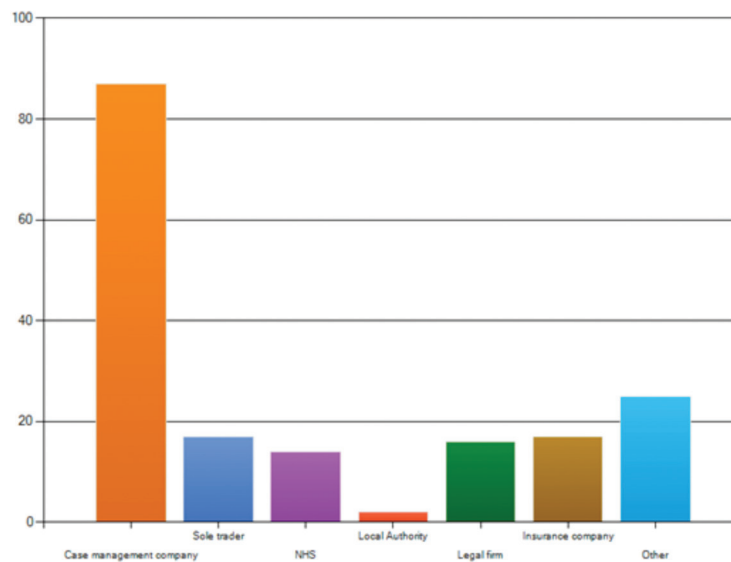


Table 1.3 Client groups

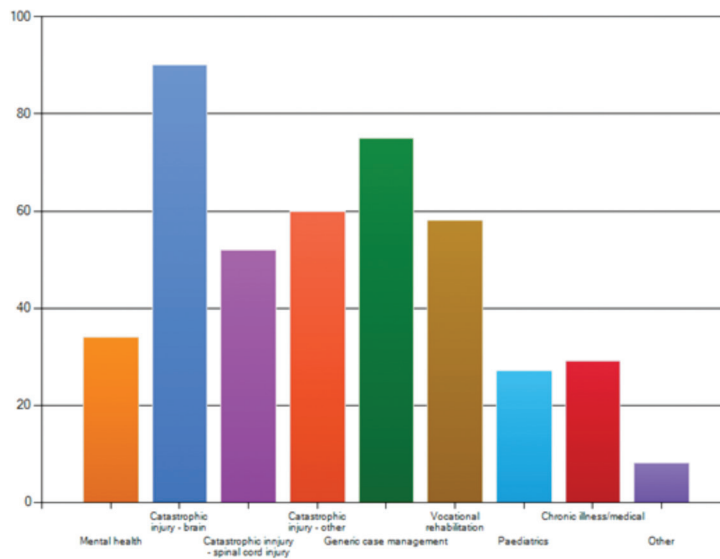
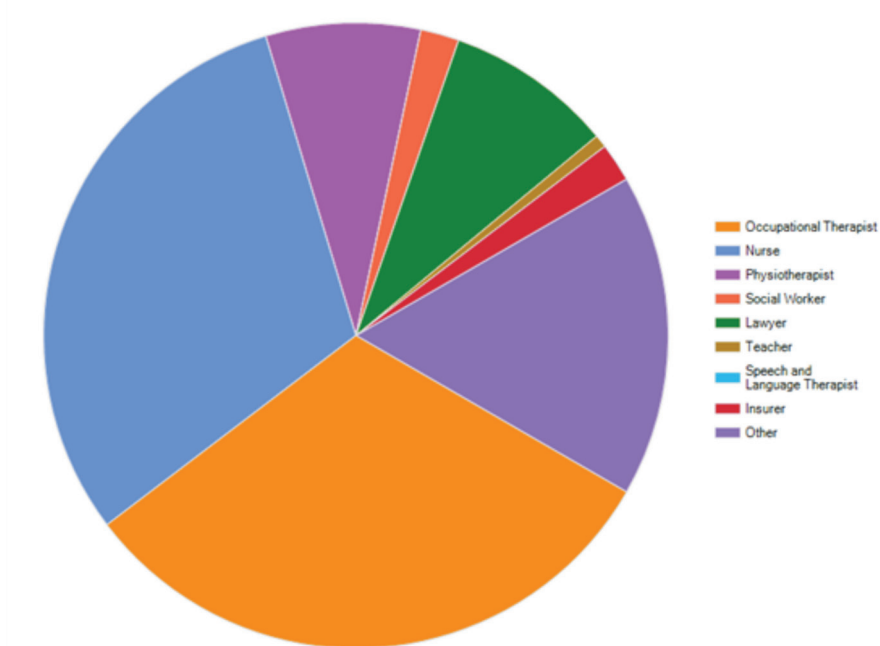


Table 1.4 Type of profession



Over 38% have held their professional qualification for more than twenty years but 59.8% have over 4 years experience in their chosen profession. Over 96% of respondents are registered with a professional body, such as the Health Professions Council or the Nursing and Midwifery Council.

4.4% did not have a professional qualification and they have backgrounds in vocational rehabilitation, employability, insurance claims, and intermediate care in NHS/social services.

With regard to level of qualification, 43.1% of respondents have a BSc qualification, 26.8% a Diploma and 19.6% a Masters in a field that they consider to be relevant to their case management role. 2.6% of respondents have a PhD and 7.8% a certificate (unspecified if at undergraduate or post graduate) level qualification.

54% of respondents have been providing case management services for between one and five years, 34.6% for between 6 and 10 years, 12.9% between 11 and 20 years and 3.2% for over twenty years. The exact spread of responses is represented in Table 1.5.

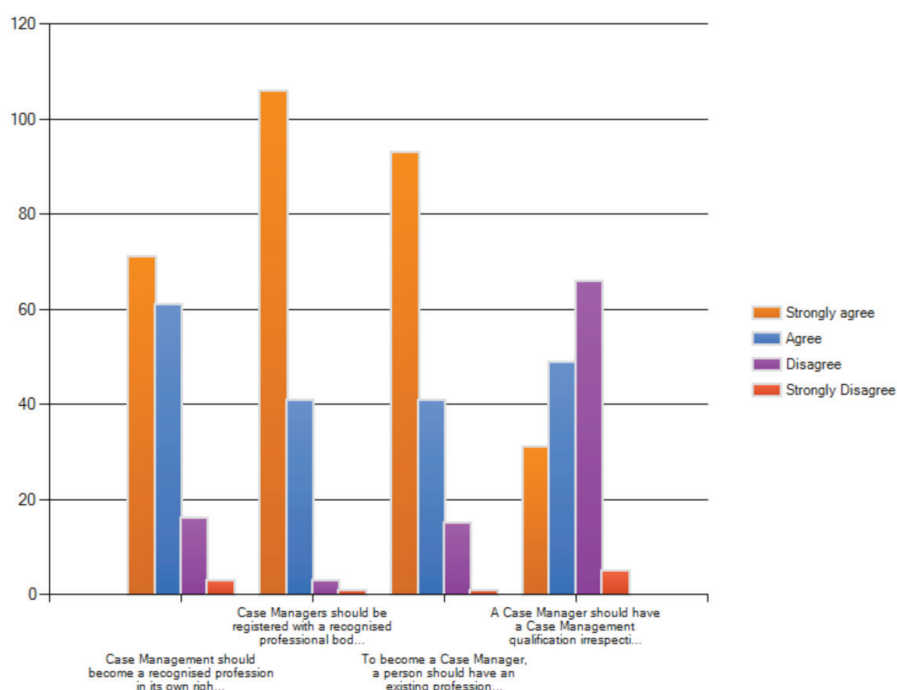
Table 1.5 Length of time providing case management services

Years of Case management provision	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	20+
No. Of respondents	5	11	15	11	19	7	8	6	4	18	1	5	2	1	3	1	0	1	1	1	4

5.1.2 A professional pathway for case managers

Respondents to the questionnaire supported professional recognition (87.4%), registration (97.4%) and professional qualification (89.3%) for case managers. There was less certainty about the need for a specific case management qualification with 43.7% disagreeing and 53% agreeing or strongly agreeing to this. The specific responses to these questions are presented in Table 1.6.

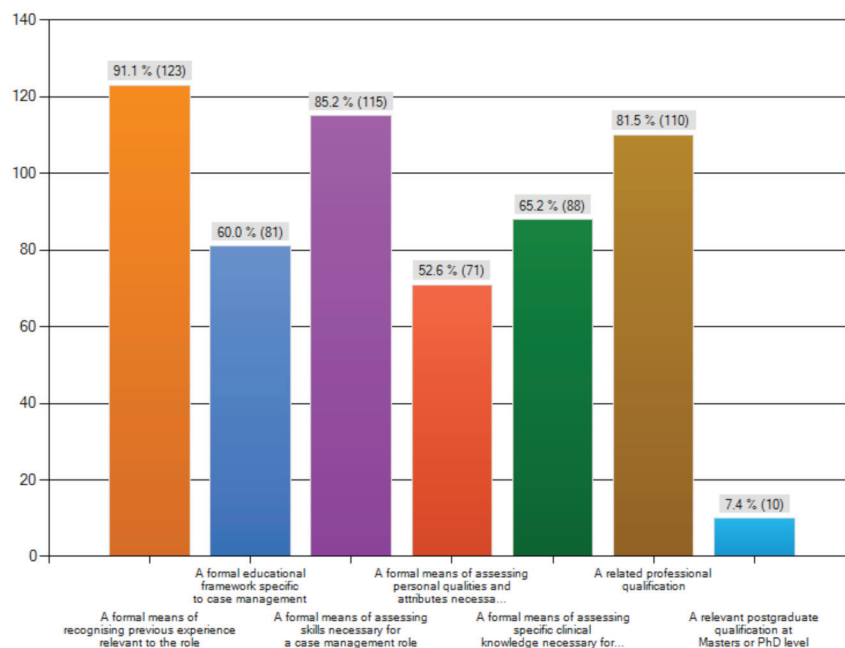
Table 1.6 Professional pathway results for case managers



There appears to be less agreement over the need for standardised (78.9%), accredited (67.7%) or certified (77.3%) professional pathways for case managers.

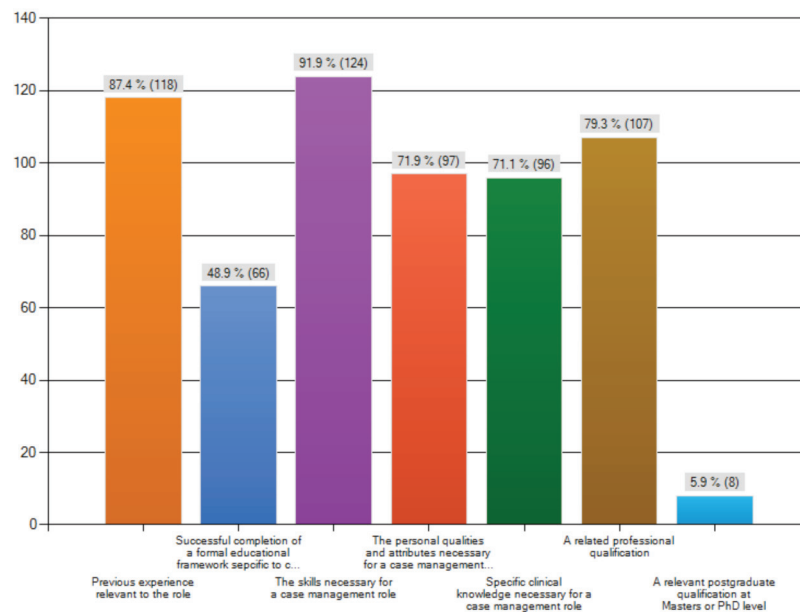
For the content of a professional pathway the results show higher value placed on recognition of experience, holding a related professional qualification and assessing case management skills. The spread of responses to this question is shown in Table 1.7 below.

Table 1.7 Content of a professional pathway for case managers



Provision of the following evidence (Table 1.8) that could be measured against standards for case management was seen as important. The highest emphasis is on recognition of previous experience (91.9%) and the lowest emphasis is on holding a relevant postgraduate qualification at Masters or PhD level (5.9%). A formal educational framework, whilst valued, is less important than other aspects.

Table 1.8 Evidence that could be measured against case management standards



There was an even spread of responses to the benefits of completing a professional pathway; registration with a professional body (80.7%), membership of a case management organisation (78.5%) and use of a professional title (78.5%). However the ability to take on more complex cases was rated by just over half of respondents (50.4%).

The main benefits of completing a professional pathway were seen as regulation, increasing quality of service and professional credibility. Consistency of approach and agreed standards of practice were also valued with a strong emphasis on the need to benefit the service user. Costs (financial and time) and not recognising experienced case managers' needs are seen as potential disadvantages. There was some indication of the need to be multi disciplinary in focus so as not to exclude some groups of case managers.

5.1.3 An educational framework for case managers

There appears to be a high level of agreement (39% strongly agree, 43.9% agree) that a formal educational framework should form part of a professional pathway for case managers. This does appear to be in contradiction to responses in the professional pathway section of the questionnaire, where the role of an educational framework was seen as less important than other contributing factors. However, when looking closely at the analysis of the preferred content of an educational framework, it becomes clear that communication skills and the defining characteristics of a case management role are the perceived beneficial outcomes of an educational framework. Not surprising is the diverse nature of responses to this question, but what may be surprising is the perceived unimportance of legal aspects and generic management skills. In regards to the delivery of such education, just over 40% of respondents saw any such education delivered at postgraduate level. Preference was given to part-time provision over a period of 6-18 months through a blended learning approach, i.e. combining online tools with face-to-face provision.

The main advantages of having an educational framework are seen as increased quality, recognition of the role as a case manager, credibility, and improved standards. Respondents envisaged potential disadvantages to be costs and not meeting the needs of experienced case managers.

5.2 Focus Group

The focus group was used as a means of clarifying responses to the questionnaire and to explore further some of the key issues with regard to a professional pathway for case managers. Initial categories included registration issues, competencies, partnership working, defining case management, differences between new and experienced case managers, professional qualification

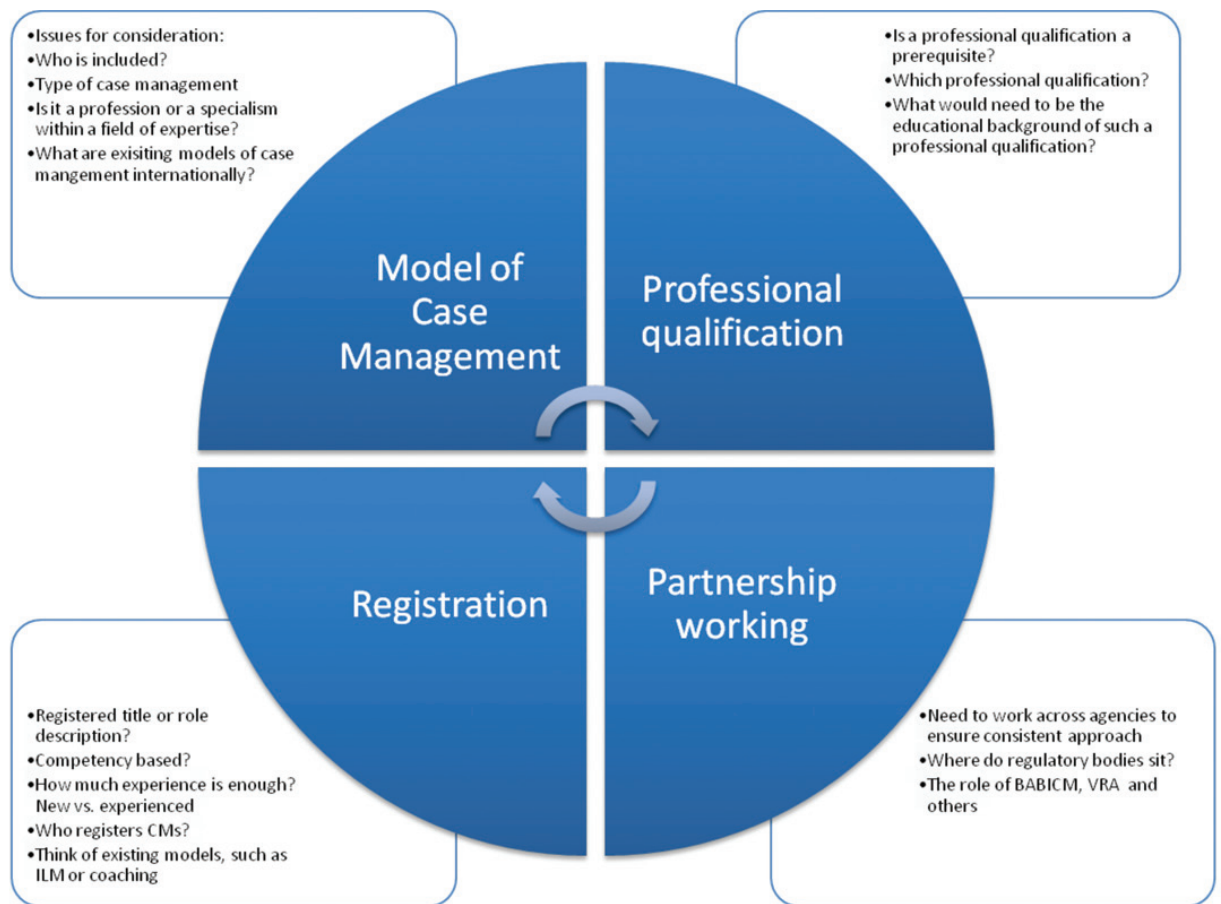
and the role an educational framework. The detailed content of these categories provided some additional insights into preferences for implementation of such pathway, but also raised questions that would need answering in order to progress the aims of the investigation (Table 1.10). The overarching question raised at this stage was 'What does the profession of case management look like?'

Table 1.9 Initial categories from focus group implementation issues and questions

Category	Implementation Issues	Questions
Registration	Case management is a role description – on top of professional qualification It could be about recognising the amount of experience – like BABICM advanced practitioner Registration has to be linked to an educational component There has to be a testing process Maybe provide evidence against set criteria to become member – like ILM?	Do you register title or role description? Or record a qualification of CM within a registered title? Protection? If you recognise certain skills – what would they be? What entitles you to register? Do you dictate the amount of hours of CPD?
Models of case management	Look at USA, Australia, NZ etc. CM as discreet qualification Specialism as key issues rather than professional title Look at models from outside CM world and health and social care Certification – like USA, testing process Consider benefits/disadvantages of USA different bodies offering certification Bring together elements from different models	What would be the best model for UK case management?
Competencies	Testing process needed Have to have experience to be a CM – not text book Competencies should be jointly agreed (between case management organisations)	What are they?
Partnership working	Make use of opportunities to do this such as: VRA conference Meet with BABICM – to agree core things and competencies BABICM/CMSUK should take a strong lead Link with VRA and UKRC, COTSS-work	
Defining case management	Consider a range of roles, types of CM and clients – E.g. VR, medical, telephone etc. Not too narrow – don't alienate some people Room for overlap but you monitor and support	Do we consider NHS and Private CM or not? Is CM a role description?
Differences between new and existing case managers	Registration doesn't reflect amount of hours of experience	How you recognise experienced CM's mishmash of skills?
Professional qualification	CM could be a role description – on top of an existing professional qualification Need experience and supervision to do the role	Is the key to have professional qualification first?
Educational framework	A starting point could be to think about what you would need to give a new case manager Once achieved educational framework you can register There should be core things you have to be able to do to demonstrate ability as CM Has to link to professional membership	

Further analysis refined these categories into four themes: models of case management practice, professional qualification, registration and partnership working. Within each of these themes areas for further consideration were identified. These can be seen in Diagram 1.1.

Diagram 1 Four themes



6. Discussion

The following discussion considers the evidence from the questionnaire and focus group and will discuss them in the first instance in relation to the objectives set out in an earlier part of this report.

‘Identifying to what extent there is a need for a standardised, accredited or certified professional pathway for case managers in the UK.’

The results suggest that respondents to this investigation do recognise the need for a recognised professional pathway for case managers (including an educational component). There is less clarity about the type of formal recognition (standardised, accredited or certified) with participants rating each potential model as feasible. The data suggests that there is a need for a specific case management qualification. Whilst the precise components of such a pathway still warrant further exploration, primacy seems to have been given to an existing professional qualification and being registered with a professional body that endorses case management as a separate profession.

6.1 The Most Feasible Model for a Professional Pathway for Case Managers

The results indicate that the majority of respondents would value a professional pathway, underpinned by postgraduate study, which recognises their level of practice, length of service and type of case management experience. This needs to be measurable in relation to agreed case management standards with the aim of increasing quality of provision. Several overarching themes emerge from the data that are worthy of further exploration in order to ascertain the most feasible model for case managers. These are: type of model of case management, professional qualification, partnership working and registration issues.

One of the areas that will require further consideration is in relation to the model of case management adopted. This area of interest is concerned with the inclusion criteria for case managers in a profession, the structure of the profession (i.e. specialism within vs. unique profession), and (related to other aspects) the institution that would legitimise case management as a profession. Whilst we have seen that respondents prefer to have any professional pathway supported by a professional qualification at postgraduate level, our data shows that case managers currently practice with a wide range of qualification. Thus, agreement needs to be reached as to the type of professional qualification required and the education that precedes such a qualification. Other issues that, to some extent, are contingent on the outcomes resulting from debating the previous two issues, relate to who the registration body may be and to what extent other criteria form part of any registration that can be assessed.

6.1.1 Type of model

The type of model chosen is dependent to some extent on two broad considerations: the inclusiveness of the definition of case management used and the specific requirements of a model for use in the UK context.

At the moment the title of case manager includes a wide range of professionals – and supposedly practitioners who do not fall within traditional occupational categories of professional. At one end of the scale there are those who have an additional professional qualification in a specialist area of work and work with clients who have complex needs. At the other end of the spectrum are those who carry out a very specific role without professional qualification such as in vocational rehabilitation or telephone case management. Between these two extremes are a wide range of workers who use the title ‘case manager’. There is a strong preference in this investigation for case managers having a related professional qualification but as the majority of respondents do have this professional background this may not be indicative of the wider field – in actual fact, it may be representative of a protectivist bias within the profession.

Being inclusive implies the need for a flexible model that supports the differing needs and type of case managers working in a variety of fields. Alternatively, choosing to focus on a specific group of case managers may be easier to coordinate but could alienate some sections of the case management community. This decision will directly influence the implementation of the recommendations.

In addition, whether case management is considered a profession in its own right or as a specialism

or role description within a field of expertise will have a bearing on the type of model chosen. The issue of who would be responsible for the registration of such a professional group is paramount and the way in which such a body would recognise and measure the range of professional competencies currently displayed within the case management community.

Although the investigation did not specifically focus on case manager competencies the outcome does emphasise the wish to be formally recognised and assessed on skills and experience to undertake the role. Who would do this is not clear from the results and existing organisations such as Health Professions Council (HPC), United Kingdom Research Council (UKRC), Commission on the Accreditation of Rehabilitation Facilities (CARF) and CMSUK are mentioned as possible organisations that could take on this role. To implement an appropriate model (including which registration body) will require decisions to be made about the range of case managers included in a definition, what they would need to do to register and what such an organisation would be required to do (e.g. register title or role).

If an inclusive approach is taken then it will be necessary to work in partnership with other organisations in the field in order to implement a model and approach that suits the spectrum represented within the case management community. There is evidence in the investigation to support partnership working between case management organisations and a sense that across boundary working would help to clarify the roles and responsibilities of case managers across fields, increase the professional profile and decrease professional protectiveness.

With regard to the type of model chosen there are two main considerations:

- The benefits of evaluating existing models from international contexts or other fields of work and choosing one that supports 'Best Practice' for implementation in the UK
- The benefits of evaluating the component parts of models from different fields and countries and taking a 'Best Fit' approach to designing a new model that suits the specific requirements of case management practice in the UK

Evidence in other domains with regard to choosing appropriate models would suggest that while it is helpful to consider examples from other countries or fields of work, trying to apply them in their entirety to the UK context may not be the most effective solution. This approach may not meet the specific needs of the case management community in the UK due to political, legislative, and cultural differences. Alternatively taking a 'Best Fit' approach, which considers the relevance of both the process and the content of any model in relation to the specific context for practice in this country, may be more successful. Human Resource Management Practices offer evidence to support this decision making process as in Boxall and Purcell (2011).

Important considerations/components of any model would be: registration process/organisation, assessment process, agreed standards/competencies, professional title/specialism, definition/description of case manager role.

It may be worth considering other domains that have undergone a professionalisation of practice in recent years. For instance, coaching was often seen as an extension of mentoring processes and was until recently not regulated and/or governed. Over the last few years, national and international organisations have been founded that regulate, govern, and accredit coaching as a profession distinct from counsellors and other advice and guidance roles. The process that these organisations have undertaken may exemplify possible pathways that can be replicated for case management. Presumably, similar questions to those posed by our investigation had to be answered to reach the stage where professionalisation was possible.

6.1.2 Professional qualification

The investigation provided strong support for case managers holding a professional qualification in a relevant background. In this case, case management becomes a role description following this initial qualification. However this seems to be in contradiction to the wish to be inclusive of a wide range of case managers (including those without this previous professional background). Since most of the respondents held a professional qualification themselves this view may not be representative of the total case management community.

There was some evidence to support an approach that recognised different levels of competence that enabled practice of different/particular types of case management. This is supported by existing evidence within BABICM where advanced case managers are able to take on more complex work after evidencing their practice at a higher level.

Although the data indicates strong opinions about the professional level of case managers there was less support for a specific case management qualification. The reasons are not clearly specified. Looking at the commentary and data, we can assume that in part this is due to the length of experience of those responding to the questionnaire. The assumption may be that an additional qualification at their respective stages in their career would not make a significant difference to their role. The emphasis is rather on formally evidencing their existing skills and experience to gain recognition and give credibility to their current practice. This raises the issue, however, that there may be a need to differentiate between individuals who are new to a case management role and those who have experiences in practicing as a case manager.

This is a key area of concern for the implementation of the results of this investigation and requires that the case management community address the issue of young/new/inexperienced case managers. There is concern that a generic registration pathway may not reflect the true amount of experience of a case manager and that considering what a new case manager would need does not necessarily appropriate with the breadth and depth of an experienced case manager. The need for ongoing supervision in the role, even for experienced practitioners, has also been highlighted and would need to be discussed.

The benefits of having a professional qualification were not clearly addressed but there were some comments which seem to indicate that an existing qualification prepares you better for the path to case management including clinical expertise and profession specific skills. For those already holding a professional qualification there is some indication that another qualification would not increase the standard of their practice as they are already meeting professional requirements – at least in line with their professional standards.

6.1.3 Partnership working

There is some evidence to suggest that partnership working between case management organisations may be the most effective way of implementing any change. The qualitative data particularly highlighted the perception that organisations can be too insular, whereas collaborative working could facilitate greater impact. Also there are some defined areas where joint working could happen such as at professional conferences, study days or working parties. A partnership approach would support an inclusive definition of case management and enable a stronger voice when lobbying for the future development of case management services in the UK. This approach seems to be supported by other organisations that have an expressed interest in the development of case managers in the UK (BABICM, VRA). The focus group emphasised the view that CMSUK and BABICM should retain a strong lead in moving this agenda forwards.

6.1.4 Registration issues

Issues surrounding registration focus on who would be able to register, what is that is being registered and which organisation would carry out the registration. There is not enough evidence from this study to fully answer these questions with little agreement amongst the participants. However the investigation has provided some interesting areas that potentially contribute to this discussion and may prove helpful in providing a basis on which to build future requirements. The respondents were unclear about which route is most suitable (i.e. accreditation, certification, standardisation) but were in agreement that some form of formal recognition was required. The evidence is clear that this should be based on provision of evidence to perform competently as a case manager and such experience should be measured against standards of case management practice.

Although there was lack of clarity about who would register and with what organisation there were some clear benefits of registration. These included formal recognition and credibility, which was often seen in conjunction with the aim of improving the quality of service to clients and commissioners of case management services. This investigation was set in the context of the longer-term vision for

case management being a profession in its own right. While it is not possible to provide evidence to fully support this vision it does provide a sound basis on which to begin a process towards achieving this. The useful questions emergent from the investigation pertain to decision on what is being register, i.e. a title or a role description; what level of experience is necessary/appropriate; what assessment process needs to support the registration, and what is the balance between educational attainment (supported by an educational framework) and practice.

Additional considerations should be given to the potential disadvantages of embarking on a process of registration as a means to gain professional status. Registration processes are exclusive (often by choice) but may therewith exclude individuals for reasons other than their professional competence and ability. For instance, registration processes tend to have a cost associated with them, which may deter or even prevent some practitioners to become registered.

6.2 Identifying the Constituent Parts of a Professional Pathway

While a formal means of recognising experience, assessing case management skills and a professional qualification were highly regarded by experienced case managers, those who are new to the role may have different views. Agreeing constituent parts of a professional pathway is therefore dependent to some extent on whether this pathway is developed for new and/or experienced case managers. There may, of course, be different needs for both groups. A competence-based approach does seem to be favoured, as implicitly the data suggests that competences are at the heart of case management. The investigation deliberately avoided discussions of competences in order not to bias the participants. However, it appears that decisions on the appropriate competences need to be made in order to take this agenda forward. There are existing frameworks in the different bodies for case managers and it may be necessary to review such competence statements

However, clinical knowledge, personal attributes, educational framework are still valued alongside the emphasis on the practical, skills-based nature of the case management role. The need for a Masters or PhD qualification holds little interest for this group.

6.3 Options for Implementation of a Professional Pathway

The main options for implementation of a professional pathway will be dependent on making decisions about the aspects outlined above. In addition, the component parts of a pathway and specifically the role of an educational framework will need to be confirmed. Whether the options are considered solely by CMSUK or in partnership with others is a key consideration and analysis of the benefits and disadvantages of this will need to be addressed.

A key consideration is the nature of the educational component and whether a competence-based approach or a formal educational route is employed.

6.4 The Type, Level and Content of an Educational Framework and what it could Contribute to a Professional Pathway

There was lack of clarity about preferences for the components of an educational framework and what it could contribute to a professional pathway. It appears that most of the components suggested were required (e.g. unique case manager skills, communication skills, legal aspects etc.) but priority areas within this were less defined. However, the findings seem to raise the question concerning the requirement for a specific case management qualification. Data suggests that this is possibly not the case for experienced practitioners and that the focus should be henceforth on evidencing existing practice.

The difference between the needs of experienced and new practitioners is again highlighted here – but there does seem to be agreement on the need for a formal mechanism that evaluates case management practice against standards, regardless of level and type of experience.

A formal means of assessing case management practice (whether academic or evidence based) would be seen to contribute to professional recognition, credibility and increased standards of practice.

There is some evidence to support a competence-based approach but with an emphasis on flexibility of access, a mix of learning approaches and level of study to include a broad group. Considering models from other fields is one possibility such as processes used in membership organisations such as the Institute for Leadership and Management (ILM).

6.5 The Impact of Implementing a Professional Pathway on Individual Case Managers and Case Management in the UK

There is limited evidence that clearly demonstrates the impact the implementation of a professional pathway may have. This is possibly due to the limited experience of most UK case managers in following a formally recognised training path for their case management role. With this in mind there are some firm considerations that will influence the eventual impact any professional pathway implemented in the UK.

For the individual case manager this may begin with meeting the different needs of new and experienced case managers. This in turn may influence (positively or negatively) the recruitment process to case management roles. Better clarity detailing the level of experience and formally recognised title should enable commissioners and clients to choose the most appropriate person for their needs. It may also clarify the expected level of service, quality, and impact. Whilst the assumption is that this is likely to impact positively on the quality of service, this may put existing and/or new case managers in a position where the lack of registration is commercially disadvantaging and/or reduce the numbers of case managers due to an inability to comply with registration requirements.

There are several possible benefits for case management services in the UK, notably the impact of working in partnership should increase the profile of case management as a profession and give strength to lobbying ability for further development of the role and movement towards a recognised profession if this is the desired future outcome.

7. Conclusions

Overall this investigation provides strong evidence in support for a professional pathway that includes an educational framework for case managers in the UK. The benefits of this are seen as professional recognition, registration, credibility and increased quality of provision. While there is less certainty about the need for a specific case management qualification this appears to be linked to the differing needs of new and more experienced case managers.

The details of who would be included in a professional pathway, who would monitor it and what would be the best model/approach require some further clarification. However, the evidence from this investigation provides insights into possible ways forward.

The type of model chosen will ultimately depend on agreeing the inclusiveness of the definition of case management used and its applicability to the UK context. There appears to be preference for an inclusive model that is implemented in partnership with key players in the case management community. However there is a strong focus on the need for case managers to hold an existing professional qualification and to have a formal means of recognising and evidencing their level of practice, length of service and type of case management experience. This emphasis would appear to reflect the professional background and length of experience of the investigation's respondents and may therefore not be indicative of the wider case management arena or those who are new to the role.

While a formal means of evidencing experience, assessing case management skills and a professional qualification were highly regarded by experienced case managers; novice case managers may have different views. The constituent parts of a professional pathway therefore need further clarification. A competence-based approach that enables evidence of capability to be measured against agreed standards of practice appears to be favoured even though this was not the initial focus of the investigation. Thus, appropriate standards need to be devised.

Clinical knowledge, personal attributes and an educational framework are valued alongside the emphasis on the practical, skills-based nature of the case management role. However which organisation could register and monitor case managers' practice needs further clarification. There

is diverse evidence to support use of an existing body, creating a new one or looking to models from other fields. Whether the professional title of case manager would be registered or not requires further debate.

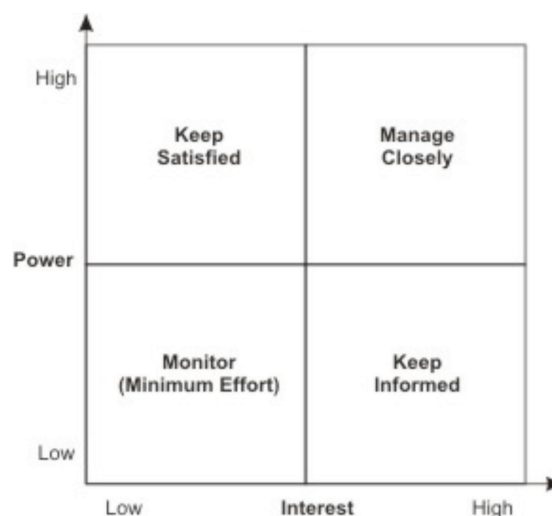
Considerations for implementation are focused on defining a strategy for future development of case management and choosing a model of case management that suits the UK context. The impact of implementing the results of this investigation focuses on raising the profile of case management in the UK in order to lobby for greater recognition and improved standards of practice. Sharing the results across a broad spectrum would aim to enlist support from relevant stakeholders to move forward the debate.

8. Recommendations

The recommendations below offer alternatives to enable CMSUK to make informed decisions about implementation of the findings from this investigation and thus furthering the professional recognition of case managers in the UK. To achieve implementation several key questions need addressing as follows:

1. What is the most feasible and realistic model for implementing a professional pathway for case managers in the UK?
 - Should a 'Best practice' approach be taken? – i.e. look at/evaluate models from other countries/ domains of work and choose the most favoured one to apply to UK (e.g. USA, Australia, ILM etc.)
 - Should a 'Best fit' approach be taken? – i.e. look at/evaluate component parts of models from other countries/domains of work and create a model that fits the UK context – i.e. appreciating the socio-political context for practice.
2. What is the best strategy/process for implementation of the findings?
 - Should CMSUK work in partnership with others to implement? Including; other case management organisations, commissioners, government, professional bodies, and other relevant stakeholders.
 - If so, how would partnership arrangements be agreed? Including; clarity and equality in distribution of roles, resources, responsibilities, costs, timescales and tasks in taking this agenda forward.
 - How would lobbying of key stakeholders be implemented? – e.g. Who are the key stake holders? What message do they want to get across? What is the best way of engaging with them? For the above points, use of a stakeholder mapping matrix may be useful (see below Figure 1).
 - Should implementation be staged or implemented in full?

Figure 1 Stakeholder mapping matrix



Issues for further consideration in addressing these questions and some benefits and disadvantages are presented in Table 1.11

Table 1.10 Considerations for addressing key implementation questions

Issue of concern	Possible Benefits	Possible Disadvantages	Comments
Design a pathway for new case managers?	Clarity of role, definition, criteria from the outset	Exclude experienced case managers, costs – willingness to pay?	Who would accredit this training? What would it entitle them to? Need to agree criteria/content
Design a pathway for experienced case managers?	Recognises experience	Excludes those with less experience, costs. Requires them to provide evidence	Would need to consider: Who would accredit this ? What would it entitle them to? Need to agree criteria/content
Case managers should have a related professional qualification?	Gives recognised accredited status to the role. Helps to clarify distinct role of case manager	Excludes those without this qualification. May limit practice to certain professional/client groups	Who determines relevance/accepted qualifications
Case managers do not need a related professional qualification?	Broadens the definition of who is included in case management role - inclusive	May reduce clarity of role for clients/commissioners	How do you measure quality of practice?
Working in partnership with others?	Higher profile More ideas and creative thinking	Overcoming differences in thinking, time consuming	
Working alone	Easier to manage/co-ordinate and could take less time	Lower profile Could be seen as protectionist	
Decisions about whether to register the title, individual or role	Clarity of who is included, what their entitlement is etc.	Could be exclusive of some groups depending on what was registered and which organisation was responsible for this	Decide which organisation would register people. Consider benefits of each option
Focusing on needs of experienced case managers	Good body of knowledge. Evidenced base approach. Recognises experience	Excludes new or inexperienced	The level of experience of respondents will have a distinct impact on their wishes so it may be worth looking further at the needs of case managers with less experience and who do not have an existing professional qualification
Agree standards of practice against which to measure competence	Clarity of expectations and quality of service	Need to still agree what competencies and how to measure them. Could alienate some practitioners	Who would agree them and measure them?
Educational framework – evidence-based, academic route or both?			Look at models from other fields (ILM, Coaching) Consider having an evidence-based and an academic route, flexibility of learning approaches.

Issue of concern	Possible Benefits	Possible Disadvantages	Comments
Consider future of Case Management being recognised as a profession – how to achieve this – explore routes for this (HPC requirements for example)			Need to do more work on
Inclusive approach – include all (new and experienced, different types of case management) in model and implement	Does not alienate some people	Makes clarity of roles difficult	May need to consider different levels of practice and entitlement to different things
Staged approach – start with experienced and evidence-based approach and then evaluate and use as benchmark to roll out to other groups	Focuses on what is known and achievable. Could be used as benchmark for wider application later. Cost effective	May alienate some	Need to clarify long term and short term plans and objectives
Defining components of professional pathway – professional qualification, evidence etc.	Clarifies who it is aimed at, at what level etc.		Need to consider who sets standards and measures them and what achievement entitles them to

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Appendices

Appendix 1 CMSUK Education Project - Definition of Key Terms

The following document provides definitions of key terms used in the CMSUK Education Project entitled:

“An investigation to identify the need for a standardised, accredited or certified professional pathway for case managers in the UK.”

Case Management: “...a collaborative process which: assesses, plans, implements, co-ordinates, monitors and evaluates the options and services required to meet an individual’s health, social care, educational and employment needs, using communication and available resources to promote quality cost effective outcomes.” (CMSUK 2011)

This definition encompasses a wide range of case managers working across different client groups, with differing professional backgrounds. This group is representative of the generic membership of CMSUK as opposed to the focus on specific client groups in other case management organisations.

Professional Pathway: This term may include a number of elements including relevant type and years of experience, prior knowledge and qualifications, specific practice skills, personal attributes and qualities and a specific educational framework for the case manager role.

Educational Framework: This term refers to any form of training and education that provides specific, acceptable, and common information and knowledge immediately relevant to the role of case manager.

Standardised/standardisation: as used in this investigation, refers to a process that formalises a set of criteria against which performance can be assessed. The assessment against explicitly stated criteria should be consistently applied.

Certified/certification: as used in this investigation, refers to a process to assure quality. To be certified, a person/organisation demonstrates their ability to meet a specified set of requirements to perform particular tasks or jobs. Often, certification is provided by an external body.

Accredited/accreditation: as used in this investigation, refers to a quality assurance process that can only be undertaken by an independent third-party (often a single non-governmental body). Accreditation provides legitimisation to organisations to issue certification (e.g. CMSUK would need to be accredited to certify Case Managers).

Appendix 2 Sample Questionnaire

Biographical data

1. I am a...

- ☐ Provider
- ☐ Commissioner

..of case management services?

2. What is your job title within case management services? (Please tick all that apply)

- ☐ Community matron
- ☐ Care co-ordinator
- ☐ Case manager
- ☐ Lawyer
- ☐ Insurer
- ☐ Other (Please specify)

3. In which sector are you responsible for providing or commissioning case management services?

(Please tick all that apply)

- ☐ Public sector
- ☐ Private/Independent sector
- ☐ Third sector
- ☐ Other (please specify)

4. What type of organisation do you work for in your case management role?

(Please tick all that apply)

- ☐ Case management company
- ☐ Sole trader
- ☐ NHS
- ☐ Legal firm
- ☐ Insurance company
- ☐ Other (Please specify)

5. With which client group do you primarily, provide or commission case management services?

(Please tick all that apply)

- ☐ Mental health
- ☐ Catastrophic injury – brain
- ☐ Catastrophic injury – SCI
- ☐ Catastrophic injury – other
- ☐ Generic case management
- ☐ Vocational rehabilitation
- ☐ Paediatrics
- ☐ Chronic illness/medical
- ☐ Administration and management
- ☐ Other (Please specify)

6. Do you have a professional qualification?

- Yes (Go to question 7)
- No (Go to question 10)

7. If yes, what is your profession?

- Occupational therapist
- Nurse
- Physiotherapist
- Social worker
- Lawyer
- Insurer
- Other (Please specify)

8. How long have you held your professional qualification?

- Less than 3 years
- Between 3 and 10 years
- Between 10 and 20 years
- More than 20 years

9. In your professional role are you registered with any professional body/bodies?

- Yes (Please specify)
- No

10. If you do not have a professional qualification, what is your practice background?
(Please specify)

11. How long have you been providing or commissioning case management services?

- Less than 3 years
- Between 3 and 10 years
- Between 10 and 20 years
- More than 20 years

12. What is your highest level of qualification?

- PhD.
- Masters
- BSc
- Diploma
- Certificate
- Other (Please specify)

Investigation Questions

13. Please rate the following statements: strongly agree, agree, disagree, strongly disagree

1. Case management should become a recognised profession in its own right in the UK?
2. Case managers should be registered with a recognised professional body to monitor their competence to practice as a case manager?
3. To become a case manager a person should have an existing professional qualification relevant to their case management practice?
4. A case manager should have a case management qualification irrespective of any existing professional qualification?

14. Please rate the following statements: yes, no don't know

To become a case manager a person should meet the requirements of a

STANDARDISED professional pathway (Standardised refers to a process that formalises a set of criteria against which performance can be assessed. The assessment against explicitly stated criteria should be consistently applied).

CERTIFIED professional pathway (Certified refers to a process to assure quality. To be certified a person/organisation demonstrates their ability to meet a specified set of requirements to perform particular tasks or jobs. Often certification is provided by an external body).

ACCREDITED professional pathway (Accredited refers to a quality assurance process that can only be undertaken by an independent third party (often a single non-governmental body). Accreditation provides legitimisation to organisations to issue certification).

15. What do you think should be the constituent parts of a professional pathway for case managers?

Tick all that apply

- ☐ A formal means of recognising previous experience relevant to the role
- ☐ A formal educational framework specific to case management
- ☐ A formal means of assessing skills necessary for a case management role
- ☐ A formal means of assessing personal qualities and attributes necessary for a case management role
- ☐ A formal means of assessing specific clinical knowledge necessary for a case management role
- ☐ A related professional qualification
- ☐ A relevant postgraduate qualification at masters or PhD level
- ☐ Other (Please specify)

16. To become a case manager a person should be able to provide evidence of the following that can be measured against agreed standards of case management practice?

(Tick all that apply)

- ☐ Previous experience relevant to the role
- ☐ Successful completion of a formal educational framework specific to case management
- ☐ The skills necessary for a case management role
- ☐ The personal qualities and attributes necessary for a case management role
- ☐ Specific clinical knowledge necessary for a case management role
- ☐ A related professional qualification
- ☐ A relevant postgraduate qualification at masters or PhD level
- ☐ Other (Please specify)

17. Successful completion a professional pathway for case managers should entitle the individual to
- Register with a recognised professional body
 - Become a member of a case management organisation
 - Take on more complex cases
 - Practice using the title 'case manager'/recognised title
 - Other (please specify)
18. What would be the main advantages to case management services of a recognised professional pathway for case managers?
19. Could you envisage any disadvantages of implementing a recognised professional pathway for case managers?
20. Who would monitor/regulate a professional pathway for case managers if it existed?
- Health Professions Council (HPC)
 - Nursing and Midwifery Council (NMC)
 - General Social Care Council (GSCC)
 - Another existing professional regulatory body (Please specify)
 - A new case management regulatory body
 - An existing case management organisation (Please specify)
 - Other (Please specify)
21. What (if anything) would a formal professional pathway for case managers offer you at this stage in your case management career?
22. There should be a formally recognised educational framework for the training of case managers to support a professional pathway?
- Strongly agree, agree, disagree, and strongly disagree
23. Please rate the following statements: yes, no don't know
- To become a case manager a person should meet the requirements of a
- STANDARDISED educational framework (standardised refers to a process that formalises a set of criteria against which performance can be assessed. The assessment against explicitly stated criteria should be consistently applied).
- CERTIFIED educational framework (certified refers to a process to assure quality. To be certified a person/organisation demonstrates their ability to meet a specified set of requirements to perform particular tasks or jobs. Often certification is provided by an external body).
- ACCREDITED educational framework (accredited refers to a quality assurance process that can only be undertaken by an independent third party (often a single non-governmental body). Accreditation provides legitimisation to organisations to issue certification).
24. In your view what aspects of case management (irrespective of professional background) should be included in an educational framework for case managers? Please order according to importance with 1 being the most important and 10 the least important.
- Identifying case management role
 - Communication skills
 - Legal aspects
 - Financial management
 - Disability rights and equality issues

- Practice placements
- Working with carers
- Recording and reporting
- Management skills
- Other (Please specify)

25. An educational framework for case managers should be at

- Masters level
- BSc level
- Diploma
- Certificate
- Vocational qualification
- BTech. or equivalent
- Other (Please specify)

26. The best way of delivering an educational framework for case managers is by:

- Direct face to face teaching – Full Time
- Direct face to face teaching – Part Time
- Block release
- E-learning
- Distance learning
- On the job learning
- Evidence-based practice
- Practical/skills based
- Blended learning approaches
- Other (please specify)

27. A formal, recognised educational framework for all case managers should be

- Less than 1 year duration
- 1 –5 years duration
- More than 5 years duration
- Other

28. What would be the main advantages to case management services of a recognised educational framework for case managers?

29. Could you envisage any disadvantages of implementing a recognised educational framework for case managers?

30. What would a formal educational framework for case managers offer you at this stage in your case management career?

31. As a case manager/commissioner of case management services I have the following training and development needs at this stage in my career

32. Have you got any other comments and/or suggestions not already covered in this questionnaire?