

RACHEL CROMACK

Case Manager

Northeast

Snapshot

Rachel has over 22 years of experience as a Paediatric Nurse, predominantly working with babies, children, and young people with complex needs, acquired brain injury and spinal cord injuries in a Paediatric Intensive Care Unit. After leaving the NHS, Rachel has worked as a Complex Specialist nurse for children and adults in the community, and as a Case Manager since 2021. Rachel strives for high standards of holistic, client and family centred care for all her clients.

Professional Qualifications

BSc (hons) Practice Innovation (child and family care) 2015

Advanced Diploma in Practice **Development - PICU** 2007

Advanced Diploma in Nursing Studies -Child Branch

2000

Experience

In September 2000, I qualified as a Paediatric Nurse and began my career on a general paediatric ward in The James Cook University Hospital in Middlesbrough. During the two years I spent working on the ward, I looked after babies, children and young people with a wide range of illness and injury. This included meningitis, encephalitis, cerebral palsy, asthma, acquired brain injuries, epilepsy and many more. I skills developed in assessing, planning, implementing and evaluatina care collaboration with the children and their families.



Contact



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Specialist Areas

- Paediatrics
- Adults
- Acquired Brain Injury
- Spinal Cord Injury
- Complex Care (acute & community)
- Client-centred goal setting
- MDT/IDT working

Memberships

- NMC
- Unison
- BABICM

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Experience (continued)

I was able to easily develop positive therapeutic relationships with all in my care. I worked with a wide multidisciplinary team and worked closely with them all to develop my knowledge of their roles. This helped me to understand how each of their roles help facilitate good quality, holistic care and rehabilitation for the patients. I quickly progressed to Senior Staff Nurse, leading the team on shifts.

In 2003, I moved my nursing role into the Paediatric Intensive Care Unit (PICU) within the same hospital. Here I gained a much wider range of nursing skills and experience also with paediatric patients aged 0 - 20 years, but with much more complex and intense care needs. This role involved looking after children requiring both acute and long-term invasive and non-invasive ventilation, tracheostomy care, airway compromise, traumatic and acquired brain injuries, spinal cord injuries, orthopaedic injuries and much more.

I took a particular interest in patients with spinal injuries and long-term ventilation and worked closely with the spinal injuries' specialist team. I led the care for long term patients on PICU who required care packages to facilitate a safe discharge home. This role included training carers in all aspects of their care, including, but not limited to, tracheostomy changes, ventilation, bowel care, autonomic dysreflexia, catherization, gastrostomy, enteral feeding, and medications. I was nominated for a prestigious Nightingale Award for this role by one of the families I worked with.

In 2004, I progressed to Band 6 Sister whilst still in PICU. This role involved managing a small team of nurses and care assistants, carrying out appraisals, being the Nurse in charge of shifts, carrying the Paediatric Cardiac Arrest bleep, attending resuscitations and co-ordinating the paediatric floor. I completed the Advanced Paediatric Life Support (APLS) course several times and was offered the chance of becoming an instructor on this course. I attended numerous resuscitation situations within PICU, the ward and A&E some following road traffic accidents, sporting injuries, and other traumatic events. This gave me valuable experience of working with the children and families right from the start of their initial injury, throughout their hospital journey to discharge home.

In 2020 after Covid-19 reared its ugly head, paediatrics were very quiet and as everyone knows, adult ITU were struggling to cope with the number of patients they were getting. As I had most of the skills required to carry out the role, I volunteered to move into Adult ITU and remained there for the following year. My time in adult ITU gave me very useful experience working with adult patients and a new range of skills in complex nursing care.



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Experience (continued)

Throughout 2020 whilst still working part time within the NHS, I took on additional roles within the community. These included research nurse roles working closely with both paediatric and adult clients and their families as well as agency Nursing shifts with Thornbury Nursing Services, both in the acute and community setting within care packages. I gained valuable experience of the complexities of working within the clients' own home and adapting care to ensure it was the least invasive on their private lives as was possible. I have since worked in the community as a Complex Nurse Specialist Nurse, leading care packages for both paediatric and adult clients. This role included training support workers in every aspect of client complex care needs, assessing competencies, developing and reviewing support plans, medication records, and risk assessments to ensure consistent, safe and effective holistic care.

In 2021, I left the NHS and moved into Case Management. With my previous experience, knowledge and skills, and attending numerous courses on the role of a case manager and the litigation process and shadowing more senior colleagues, I was able to adapt quickly to the role. I built up a caseload of both paediatric and adult clients, predominantly with brain and orthopaedic injuries and had the chance to work with clients from the INA stage, going through the litigation process and post settlement. I have experience of conducting and writing INA reports, witness statements, care planning and evaluating, costing care packages and therapy input, organising and leading MDT meetings, writing progress reports and providing detailed care notes. I built up strong therapeutic working relationships with all my clients, their families, support workers, therapy and litigation teams. My focus is always client and family centred, ensuring that they achieve the best possible outcome.