

# JOE ATKINSON

Case Manager

North East and Yorkshire

## Snapshot

Joe has worked as a nurse for approaching six years. He has experience working in a neurorehabilitation setting, with long term neurological conditions, spinal injuries, learning disabilities. Joe has supported individuals following traumatic brain injury, spinal injury or other catastrophic injury and individuals with long term conditions such as, cerebral palsy and motor neuron disease and individuals with various learning disabilities. He believes rehabilitation and promoting independence to be the most important work we can do and place these as the foundations to the care that he provides.

## Professional Qualifications

Access to Allied Health Professions  
- York College

September 2013 - August 2014

First Class Honours Degree, Bachelor of  
Science in Nursing (Mental Health)  
- University of York

September 2015 - August 2018

## Experience

I have been a mental health nurse for approaching six years, working predominantly in neurorehabilitation following traumatic brain injury and with individuals with long term neurological conditions or catastrophic injuries, such as spinal injuries.

I graduated from the University of York, with a first-class honours' degree in Nursing (Mental Health) in 2018 and was awarded the Nursing



## Contact

01642 713720 | 0783 123 3532

joe.atkinson@ccms.org.uk

www.ccms.org.uk

Morton House, Morton Road,  
Darlington, DL1 4PT

## Specialist Areas

- Acquired brain injury
- Medication administration
- Spinal injury
- Learning disabilities
- Wound treatment
- Stoma
- Catheter care
- Risk assessments
- Mental capacity assessments

## Memberships

- Nursing and Midwifery Council (NMC) Pin: 18H2462E
- Member of British association of Brain Injury Case Management (BABICM)

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## Experience (continued)

(Mental Health) in 2018 and was awarded the Nursing Times Nursing Student of the Year (Mental Health). Following graduation, I commenced work as a Mental Health Nurse at York House, a neurorehabilitation setting for individuals following a traumatic brain injury.

During his time at York House, I was responsible for the day-to-day nursing care of residents, including medication administration, diabetes care, PEG care and treatment of wounds / skin integrity. Residents at York House often presented with complex physical needs including stoma care, catheter care and PEG care. This enabled me to vastly improve my knowledge base and skills with regards to physical health and complex care.

Many of the residents I supported presented with a variety of challenging behaviours, enabling me to improve and put into practice de-escalation techniques, ensuring the safety of residents and staff alike, and offering support and reflection for residents and staff post incident. I ensured the completion of appropriate risk assessments, promoting positive risk taking where safe and appropriate, to improve independence on a resident's rehabilitation journey.

Whilst completing my day-to-day duties, I was responsible for promoting independence with regards to all aspects of a resident's life, supporting the wider multi-disciplinary team (MDT) with goals set by them but also focussing on promoting independence with healthcare needs. This included promoting self-administration of medication, where safe and appropriate and promoting independence with regards to management of health needs, including PEG care and diabetes care, utilising technology such as the freestyle libre system for management of diabetes.

As named nurse for up to 6 residents, I was responsible for the completion and review of complex care plans. I completed Mental Capacity Assessments, ensuring when lacking capacity was determined, decisions were always made in the persons best interests. I completed Hospital Managers Reports and Mental Health Tribunal Reports for residents detained under the Mental Health Act, this included attending both hospital managers and tribunal hearings to both present my report and support the resident through this process. I was able to create excellent professional relationships with residents at York House, utilising interpersonal skills to create a good therapeutic relationship to further promote rehabilitation and independence.

At York House I worked with a wide range of other professionals within the MDT. I attended and chaired MDT meetings. MDT meetings often included families and external professionals. I communicated on a day-to-day basis with professionals within the MDT with regards to ongoing care or rehabilitation goals.

In 2020 I commenced work as a Disability Assessor for the personal independence payment on behalf of the Department of Work and Pensions. This role involved completing interviews with claimants, utilising his interpersonal, communication and clinical skills to ensure a detailed but concise report was completed.

## Experience (continued)

This role enabled me to improve in both communication and interviewing skills as well as assessment and report writing skills. I was able to increase my knowledge base on a variety of physical health and mental health conditions. However, whilst in this role I realised how much I enjoyed working with individuals in a therapeutic setting and returned to York House in 2021 for a year before moving to Alne Hall in 2022.

At Alne Hall I supported individuals with a wide variety of long-term neurological conditions, as well as spinal injuries, autism and learning disabilities. Many residents at Alne Hall required complex care due to their ongoing needs. This included PEG care, Trachea care, Catheter care, wound care and management of diabetes, COPD, skin integrity, continence needs and dietary requirements, often including modified food and fluids.

I was responsible for the staff on duty and regularly completed supervision with staff, ensuring that concerns were met and that a high quality of care was offered to all residents. I was responsible for the monthly review of care plans, risk assessments, mental capacity assessments, Malnutrition Universal Screening Tool and Waterlow scores to ensure residents health needs were met, identifying any deterioration, and escalating appropriately as required.

I was able to promote independence and rehabilitation where possible, enabling residents to take charge of their care needs where safe and appropriate and ensuring that relevant risk assessments were in place. I supported some residents at the end of their lives ensuring that their needs were met, anticipatory medication was available and administered as required and as paramount, ensuring respect and dignity was maintained throughout, whilst supporting families as well.

As a Case Manager I will use my experience of acquired brain injury, complex health issues and behaviour to provide assessment and therapeutic input to enable clients to move through the process of rehabilitation. Due to my nursing experience, I can set up and manage complex packages of support for clients.