

An Audience with Lizanne Elliot

To continue our 'Audience with' series, we recently had a virtual discussion with Lizanne Elliott, OT, Case Manager and Managing Director of Integrated Case Management.

A member of the Royal College of Occupational Therapy, The Case Management Society of the United Kingdom and British Association of Brain Injury & Complex Case Management, Lizanne has a wealth of experience in the Medico Legal Sector.



Q: Thanks for taking the time to speak to us today Lisa. Let's begin with hearing a bit about your background and the things that have lead you to this point.

A: Thanks very much and it's great to talk to you today. I am an Occupational Therapist (OT) and I worked in the NHS for 20 years on the clinical side and then worked my way up into the management realms within the NHS. I very much enjoyed making a difference to my patients' lives and then as I progressed into management, being responsible at a strategic level to ensure that patients received the best quality care possible. Sadly, this was not always possible due to funding issues and at times bureaucracy. It was with a heavy heart I left the NHS, a service that I still firmly believe in, but I needed to explore a way that I could make more of a difference for my clients and fulfil the role that I trained for over 20 years previously. Case management fitted this perfectly.

To be able to be involved with a client at one of the most challenging times of their lives is a privilege. We are allowed access to some of the most intimate details of someone's life and they put their trust in us to help them improve their quality of life and maintain dignity and purpose.

Having worked in a clinical and operational role as a case manager I am now the managing director of Integrated Case Management. Our aim is to help our clients to achieve their maximum level of independence and the highest possible quality of life, for the rest of their lives. We are based in Dorset but have case managers across the south of England. My role now is not only clinical but I am also passionate about supporting our case managers so they can provide the highest quality care and support for our clients.

Q: It's great that you're so pivotal in your clients' lives. How important is it to support them and be part of their inner circle?

A: It is very important to support our clients at this most difficult time. They have never been through this process before and not only are they having to come to terms with life changing injuries but also navigate their way through the litigation process.

As case managers, we are there to support them and identify their clinical needs, establish a robust rehabilitation plan, set integrated rehabilitation goals and support our clients to progress and increase their level of independence. To ensure that the client makes the best recovery possible it is essential to engage fully with the client's family and those people

An Audience with Lizanne Elliot

closest and most important to them. This provides us with additional insights, but a life changing injury does not only effect the individual client; there are ripple effects to all of those around them and we must be mindful of this and supportive as required.

As case managers we also have a role to support our clients through the litigation minefield. To reiterate what their solicitors have told them, to explain about expert assessments and their place in the process together with reassurance on a regular basis. Litigation can take time and this brings with it frustration, so when face to face with our clients we often have to manage these tricky conversations and their expectations. Working as an expert, as a number of the case managers within Integrated Case Management do, provides us with a fully rounded knowledge of the litigation process and what the clients and their families are likely to experience.

Q: Yes, that makes perfect sense. When did you move on from your role as an OT to become a Case Manager and where were you based?

A: I left the NHS in 2014 and leading up to this, I worked in a variety of settings as an OT in London and Dorset, ranging from A&E to community neuro rehab, hand therapy and orthopaedics in primary and secondary care. My final roles within the NHS were as OT professional lead for Dorset healthcare and managing community services in Dorset.

I continued to work as an OT in the private sector until the beginning of this year, but due to additional work commitments have put this on hold for now. I am passionate about the essential role an OT can play in the rehabilitation process for clients and the diversity of this role depending on the client's needs.

Q: So, you've worked in the industry for a long time, what makes you so passionate about Case Management?

A: It's about making a difference to the client's life, supporting them through one of the most difficult times of their lives. Assisting them to make sense of what has happened to them and how life can return to some form of normality, be that with additional care support, a rehabilitation programme, equipment etc. By seeing clients in their chosen home environment they are often

more at ease and we are able to establish where the issues may be at an initial assessment. From walking up the front driveway to the nuances of the relationship between family members, and we establish these issues through conversation and observation. We are fortunate to have time to spend with our clients which in the long run can be cost effective as we are able to establish the most pressing issues and those that are having the greatest impact on the client's life at an early stage.

As case managers we also get to know the client's family well and they are able to assist us in piecing together life before the injury and also life as a result of the injury. It is often as we are walking to the door with the family member at the end of the visit when the most honest conversations flow. The walk up the hallway can sometimes take up to half an hour!

Case management is also fully holistic. As an OT, holistic assessments are the building blocks of our treatments, so it was a natural transference of skills into a case management role. I am honored to be able to assess a client and together we establish what their needs are and with clinical reasoning then working alongside the instructing parties to ensure that the client's needs are met and they progress with their rehabilitation goals to achieve their maximum level of function and independence.

Taking a holistic approach also enables us to focus on the physical and psychological needs of our clients, something when working within the constraints of the NHS I did not always have time to do. Sometimes our clients are able to engage with psychological treatment relatively early on in their rehabilitation, but often it is once the initial intensive rehab begins to reduce, and they no longer have their weeks full with rehab sessions and expert appointments, that the reality of their injury can impact on them. It is essential that as case managers we are prepared for this and are ready to support our clients and their families with experienced psychologists. I think this highlights that we can provide our clients with the support and tools to aid their recovery, but we are led by their pace as they adapt to their life changing injury. This process is different for every client. As case managers we must be aware of this, but it is also our role to communicate this with instructing parties, to ensure there is no potential misunderstanding with regards to disengagement.

An Audience with Lizanne Elliot

Q: When you think about your clients who you've helped over the years, is there one that stands out as a best practice example?

A: There's one client that I am working with at the moment who is really early on in her recovery, as she was injured late last year. This client had an above knee amputation following a road traffic collision. The reason this client stands out is that we are working in a really integrated way with the MDT and instructing parties.

The client is under the care of Dorset Orthopaedic and has attended several rehabilitation sessions where she has been provided with her prosthesis and she now continues to attend Dorset Orthopaedic for physio and socket reviews and fabrication as required.

The client is fully engaged in the rehabilitation process, so much so that at times I have to encourage her to take a day off. She told me that she views her rehabilitation as her job at the moment and this is certainly paying off. She has returned to driving and mobilizing 2 km on a daily basis and is beginning to consider her hobbies, with the purchase of an E bike pending.

The relationship as a case manager that I have with the client and her family has been one of trust and confidence and even when she has found the thought of an activity daunting she has trusted those around her to pursue this. This is particularly true when working with Mary Tebb from Dorset Orthopaedic who has challenged my client on very undulating terrain and in a variety of settings, including beach walking.

This client has also stood out to me as the instructing parties have been very amenable to meeting her needs. The support from Dorset Orthopaedic, with their reports including detailed outcome measures and videos, has made my job of justifying additional funds much more straightforward. As a whole team we have the client at the centre, which will ultimately enable her to enjoy a fulfilled and active life.

Q: We have touched on this a little already, but how would you describe the importance of good Case Management in the role it plays in client rehab?

A: The role of a good case manager is essential for the client's rehabilitation. They must have the skills to identify the short and long term needs of the client, be able to set person-centered achievable goals and ultimately be able to form a relationship with the client and those closest to them built on trust and confidence.

Our clients and their families are having to adjust to the life changing injuries and the effect this will have on the rest of their lives whilst trying to navigate the litigation process. It is our role as case managers to support them with all of this and to focus the client on their rehabilitation and feeling empowered again in their lives.

Q: How do you think rehab companies like Dorset Orthopaedic help Case Managers through the process you have described?

A: I think it is communication that is the key. Having a dedicated person such as Sue Hughes makes the life of a case manager so much easier when discussing clients and in particular when dealing with funding and invoice issues. Sue always seems to know so much about the clients which is very reassuring.

I think an understanding of the litigation process is also essential for companies like Dorset Orthopaedic. Not only to understand the importance of evidence behind recommendations, but to understand that the litigation process can be very slow at times, and also to simply understand the terminology.

As case managers we are often juggling many things for our clients, so to have the MDT under one roof is very helpful, this aids communication and ensures that the client goals are collaborative without any cross over. I also find it particularly helpful with Dorset Orthopaedic that if I am unsure of something they are more than happy for me to phone up and ask, 'What do you think about this?' They are always very helpful and evidence based.

Q: How do you think rehab companies like Dorset Orthopaedic help Case Managers through the process you have described?

A: I think the most important thing is probably the relationship that we have with our clients.

An Audience with Lizanne Elliot

If our clients have confidence and trust in their case manager then the rehabilitation process is often much smoother. This trust is so important when introducing the MDT to the client and also when working with clients and their families setting up complex care support teams. We must never lose sight of the fact that we are expecting our clients to allow total strangers into their homes at the most difficult time of their lives and discuss very private and personal details about their lives and functional ability.

Good communication and an understanding of what the client enjoys, their hobbies and interests, are also essential in creating and maintaining a strong relationship for our clients. For example, one of my clients is an avid Sheffield Wednesday football fan, prior to my visits with him I catch up on the latest scores so we can always break the ice with banter about his love of Sheffield Wednesday and my allegiance to Bournemouth!

This relationship extends to the wider family and those closest to the client. They also need to have confidence and trust in you to ensure that the client is at the centre of the rehabilitation process and is engaged.

Q: Where do you think the biggest challenges or opportunities for the case management industry lie over the next few years?

A: Wow, that's a tricky question. None of us could have predicted the year that we have had so far and the current challenges for case managers is adapting to new ways of working with our clients and wider teams. Communication more than ever is crucial. Our vulnerable clients and their families have found this year particularly difficult and case managers have played a pivotal role in supporting their clients' on going needs whilst ensuring their own safety and that of those close to them.

Over the next few years, I think it will be interesting to see how driverless cars develop and the impact on our industry. Who would be responsible for any injuries caused in road traffic accidents involving a driverless car? Food for thought.

Q: So you've been bringing clients to Dorset for a number of years now. How did you first hear of us?

A: I attended one of Dorset Orthopaedic's conferences and have not looked back. Living in Dorset also helps as being up the road I can pop in at any time!

Q: So what were your first impressions of Dorset Orthopaedic?

A: Very friendly, professional, knowledgeable and really approachable. Everyone is very passionate about what they do. I always say to people, if you get a chance to look around the facilities, go and have a look as it's just fascinating.

The reason I choose Dorset Orthopaedic as a clinical provider is through my experience of working with them and what they can bring to my client. Amputees can be complex but if you have the right team around them, they can go on to live full and independent lives, whatever age their age or circumstance.

Lizanne Elliott is Managing Director at Integrated Case Management and is also an experienced Case Manager, expert witness and has 20 years' experience working as an Occupational Therapist.

Lizanne has a wealth of knowledge and experience in the medico-legal sector, both in clinical and operational posts.

Lizanne is committed to ensuring that her clients and those of Integrated Case Management receive the highest quality of care and rehabilitation to enable them to achieve their maximum level of potential and independence.

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