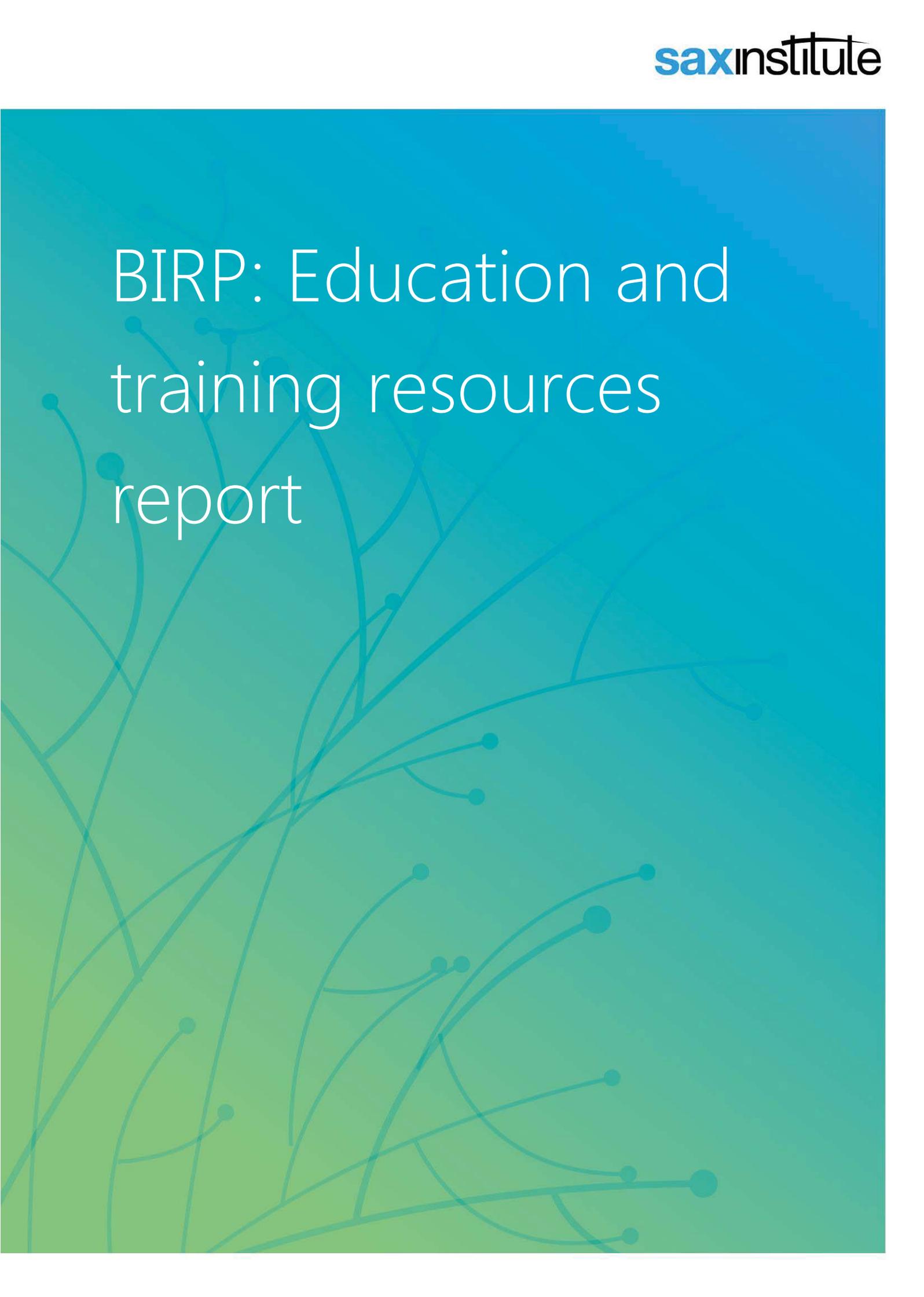


BIRP: Education and training resources report

The background of the page is a gradient from teal at the top to light green at the bottom. Overlaid on this gradient are several thin, white, curved lines that resemble a network or a stylized plant structure. Some of these lines end in small circular nodes.

Education and training resources for the Brain Injury Rehabilitation Program (BIRP) case managers report prepared by the Sax Institute for the Agency of Clinical Innovation (ACI), February 2016

This report was prepared by:

Dr Simone De Morgan from the Sax Institute.

Enquiries regarding this report may be directed to the:

Head
Knowledge Exchange Division
Sax Institute
www.saxinstitute.org.au
knowledge.exchange@saxinstitute.org.au
Phone: +61 2 91889500

Suggested Citation:

Sax Institute. BIRP education and training resources report. Sydney: Sax Institute; 2016.

Table of contents

- Executive summary..... 4
- Part A: BIRP education and training resources survey..... 4
- Part B: National and international education and training resources for case managers 6
- Recommendations 8
- Acknowledgements 9
- Abbreviations 9
- Part A: BIRP education and training resources survey..... 10
 - 1 Introduction and methodology 10
 - 2 Results of the survey 12
- Part B: National and international education and training resources for case managers 34
 - 1 Introduction and methodology 34
 - 2 Results..... 34
- Attachment 1: Final BIRP Education and Training Survey 40

Tables

- Table 1: Profile of respondents 13
- Table 2: Written resources as part of the orientation program..... 18
- Table 3: Written resources for ongoing professional development 19
- Table 4: Written resources used in the orientation program and for ongoing professional development 20
- Table 5: Training as part of the orientation program 23
- Table 6: Training for ongoing professional development..... 25
- Table 7: Training used in the orientation program and for ongoing professional development..... 25
- Table 8: Comments about the gaps in the education and training resources for case managers..... 28
- Table 9: Priority resources for case managers 30
- Table 10: Further comments about the education and training resources for case manager or perceived gaps in resources 32
- Table 11: Education and training resources provided by the British Association of Brain Injury Case Managers (BABICM) 35
- Table 12: Education and training resources provided by the Case Management Society UK (CMSUK)..... 36
- Table 13: Education and training resources provided by Comcare 38

Figures

- Figure 1: Written resources as part of the orientation program 17
- Figure 2: Written resources for ongoing professional development 19
- Figure 3: Training as part of the orientation program..... 22
- Figure 4: Training for ongoing professional development..... 24

Executive summary

Part A: BIRP education and training resources survey

The Agency for Clinical Innovation (ACI) commissioned the Sax Institute to map and report on the education and training resources for case managers working in Brain Injury Rehabilitation Program (BIRP). This document reports on the results of that mapping exercise.

To identify the resources, Sax Institute developed a survey to investigate the following:

1. Education and training resources that are currently in use, or being developed, for case managers working in BIRP
2. The perceived gaps in education and training resources for case managers

The scope of education and training resources sought for this report included:

- Resources provided to case managers as part of their orientation program and as ongoing professional development
- Written resources such as booklets/pamphlets, books, chapters, information sheets and information from websites; and training such as university and TAFE courses, short courses, workshops, forums, conferences and mentorship programs
- Resources from NSW, other states and internationally as well as those developed within individual services
- Resources respondents had used in the last 2 years or were aware of.

The BIRP Education and Training Survey was developed by the Sax Institute in consultation with the NSW BIRP steering committee.

The survey was intended to be completed online by ACI Network steering committee members (or another case manager from the service) in collaboration with other case managers from the service; and private members of the Rehabilitation Network nominated by ACI in collaboration with other case managers from the service.

The survey was sent as a Survey Monkey link to all members of the ACI Network steering committee (n=15); and to private members of the Rehabilitation Network nominated by ACI (n=10).

Results

Respondents

- Nineteen respondents completed the survey in collaboration with case managers from their service.
- Most respondents (n= 15; 78%) were from the ACI Network Steering Committee (or another case manager from their BIRP service). Three respondents were private members of the Rehabilitation Network (16%). One respondent did not complete the profile information in the survey.
- Overall, the survey represented 137 case managers working with people with brain injury across NSW.

Education and training resources as part of the orientation program and for ongoing professional development

- BIRP services reported that many of the resources used as part of the orientation program were also used for ongoing professional development.

- The types of written resources for case managers working with people with brain injury as part of the orientation program and for ongoing professional development that were most available across services or that respondents were most aware of included: written resources developed by the individual services; written resources accessed via www.tbistafftraining.info; and other written resources (see main report Part A).
- The results also show that the availability and/or awareness of the types of written resources for case managers working with people with brain injury as part of the orientation program and for ongoing professional development varies between services.
- The types of training as part of the orientation program that were most available across services or that respondents were most aware of included: training accessed via www.tbistafftraining.info; mentorship programs; goal training; and training developed by the individual services.
- The types of training for case managers working with people with brain injury as part of ongoing professional development that were most available across services or that respondents were most aware of included: goal training; motivational interviewing; NSW BIRP forum; training from HETI (Health Education and Training Institute); and training accessed via www.tbistafftraining.info.
- The results also show that the availability and/or awareness of the types of training for case managers working with people with brain injury as part of the orientation program and for ongoing professional development varies between services.

This report provides a list of education and training resources as part of the orientation program and for ongoing professional development reported by case managers in this survey.

Priority resources for case managers

- This report provides a summary of the key areas that respondents identified as gaps in the education and training resources for case managers.
- Respondents also suggested that the education and training should largely be multi-component, that is, include written resources, on-line resources and training e.g., workshops and courses.

Barriers to accessing education and training resources

Comments from respondents about the barriers to accessing education and training resources include:

- Training is accessed online and this is problematic due to issues with health service technology/policy.
- Rural case managers have limited access to training opportunities due to cost of course; travel and accommodation.

Gaps in the education and training resources for case managers

- Respondents in collaboration with case managers in the service were asked about the adequacy of the education and training resources to fulfil their role as case managers. Eighty-one percent (n=91) of the 111 case-managers who were represented in this question reported that they had adequate education and training resources to fulfil their role as a case manager.
- The comments provided in the report highlight that although most people felt competent to fulfil their role as case managers, they felt that they would benefit from additional education and training resources.

General comments from respondents about how the education and training for case managers could be improved include:

- All training should include written resources as well as a face to face component (e.g., workshops) to discuss how to implement knowledge in practice.

- Greater promotion of available education and training resources for case managers would be useful e.g., a regularly updated list of resources
- More formalised training resources and a more formalised mentorship programme were preferred by services.
- Greater consistency of education and training resources across teams and across BIRP programs.
- A flow chart that includes all areas that could/should be considered for each of the core elements / stages of case management would be useful. This resource would act as a "check" for review by case managers when considering a person's situation.
- A spreadsheet / electronic system to track work would be useful.

Part B: National and international education and training resources for case managers

The Agency for Clinical Innovation (ACI) commissioned the Sax Institute to review and report on information about education and training resources for case managers available on three websites nominated by ACI including:

1. British Association of Brain Injury Case Managers (BABICM) <http://www.babicm.org>
2. Case Management Society UK (CMSUK) <http://www.cmsuk.org>
3. Comcare (Australian Government) <http://www.comcare.gov.au>

The scope of the education and training resources sought for this report included:

- Online written resources such as guidelines, documents, booklets/pamphlets, information sheets, newsletters, books and chapters
- Training (including online and face-to-face training) such as courses, workshops, webinars, forums and conferences
- Information provided on social media such as twitter and facebook
- Report on access to information on the nominated websites (that is, whether membership is required to access information)

Results

A wide range of education and training resources are provided by the three nominated agencies (BABICM, CMSUK and Comcare) including short courses, workshops, forums, conferences, webinars, guidelines and audit tools, online newsletters, newsboards, fact sheets, and information and discussion provided through social media.

British Association of Brain Injury Case Managers (BABICM)

The BABICM is a professional association established in 1996 to promote the development of case management in the field of acquired brain injury. BABICM represents the professional interests and concerns of case managers who work with those who have suffered an acquired brain injury or other complex condition which requires co-ordinated rehabilitation, care and support.

BABICM provides the following types of education and training resources:

- BABICM Competency Framework and Standards of Practice
- CMSUK / BABICM Code of Ethics
- workshops, forums and an annual conference
- webinars
- newsboard for news, relevant articles and reports
- online newsletters
- social media (twitter)

The main report Part B describes examples of the education and training resources provided by BABICM and provides information about accessibility to the resources.

Case Management Society UK (CMSUK)

The Case Management Society UK (CMSUK) is a non-profit association of case managers (incorporated in 2001 and registered as a charity in 2006).

CMUK provides the following types of education and training resources:

- CMSUK Standards of Practice and Best Practice Guidelines
- CMSUK / BABICM Code of Ethics
- CMSUK Standards Audit Tools: The Standards contain audit tools (tick box checklists) so that case managers can regularly monitor their performance, or have the tools available to show to others as a measure of quality
- workshops/study days, forums and an annual conference
- newsboard for news
- online newsletters
- social media (twitter, Facebook and LinkedIn)

The main report Part B describes examples of the education and training resources provided by CMSUK and provides information about accessibility to the resources.

Comcare (Australian Government)

Comcare is established under the Safety Rehabilitation and Compensation Act 1988 (SRC Act). The SRC Act provides for the rehabilitation of Commonwealth employees following a work related injury. The legislation is designed to make sure the employer (as the rehabilitation authority) is responsible and accountable for the safe and early return of their injured employee.

Comcare provides the following type of education and training resources:

- Safety Rehabilitation Compensation (SRC) courses such as *SRC Act in a day*, *A Rehabilitation Delegates Guide to Case Management (formerly Case management essentials)*, *A Rehabilitation Delegates Guide to Complex Cases (formerly Case management: the next steps)*, and *A Supervisors Role in Early Intervention and Rehabilitation*
- Comcare's Rehabilitation Case Manager Forums
- Comcare National Conference
- *Guidelines for Rehabilitation Authorities 2012 Safety, Rehabilitation and Compensation Act 1988 Section 41*
- *Rehabilitation handbook: Understanding rehabilitation and return to work under the Safety, Rehabilitation and Compensation Act 1988*
- Case manager competencies: framework for case managers
- Fact sheet: *What can I do? Rehabilitation case manager*

The main report Part B provides examples of the education and training resources provided by Comcare.

Recommendations

- Greater awareness of available education and training resources. Case managers would benefit from a regularly updated list of education and training resources within NSW, other states and key international organisations. This would also contribute to greater consistency of education and training among case managers across BIRP.
- Increase opportunities for multi-component education and training including written resources (printed and on-line) and workshops/courses (face-to-face and on-line).
- Ensure that on-line education and training resources can be accessed from most services.
- Provide additional financial support, if possible, to rural case managers to increase their access to training e.g., travel and accommodation costs
- Consider introducing a more formalised education and training program for case managers

Acknowledgements

The survey and development of this report was led by Dr Simone De Morgan from the Sax Institute. Dr Carmen Huckel Schneider from the Sax Institute provided feedback on the initial survey and on the draft report.

Thank you to the ACI Network steering committee members, BIRP case managers and members of the private rehabilitation network who participated in the survey.

Thank you especially to Barbara Strettles, Network Manager, Brain Injury Rehabilitation Directorate (ACI) who provided feedback on the initial survey and helped to recruit respondents to the survey; and to Denise Young, Program Manager/Social Worker, Mid Western BIRP and Margaret Doyle, Rehabilitation Case Manager, Westmead Brain Injury Rehabilitation Service who provided feedback on the initial survey.

Abbreviations

BIRP	Brain Injury Rehabilitation Program
BIRD	Brain Injury Rehabilitation Directorate
ACI	Agency for Clinical Innovation
LTCS	Lifetime Care & Support Authority/Scheme
BIA	Brain Injury Australia
NDIS	National Disability Insurance Scheme
ASSBI	Australian Society for the Study of Brain Impairment
CPD	Continuing Professional Development
MAA	Motor Accidents Authority
BABICM	British Association of Brain Injury Case Managers
CMSUK	Case Management Society UK

Part A: BIRP education and training resources survey

1 Introduction and methodology

1.1 Introduction

The Agency for Clinical Innovation commissioned the Sax Institute to map and report on the education and training resources for case managers working in BIRP. This document reports on the results of that mapping exercise.

To identify the resources, Sax Institute developed a survey to investigate the following:

1. Education and training resources that are currently in use, or being developed, for case managers working in BIRP
2. The perceived gaps in education and training resources for case managers

The scope of education and training resources sought for this report included:

- Resources provided to case managers as part of their orientation program and as ongoing professional development
- Written resources such as booklets/pamphlets, books, chapters, information sheets and information from websites; and training such as university and TAFE courses, short courses, workshops, forums, conferences and mentorship programs
- Resources from NSW, other states and internationally as well as those developed within individual services
- Resources respondents had used in the last 2 years or were aware of.

1.2 Development of the survey

The Sax Institute developed an online survey (Survey Monkey) to be completed by all members of the ACI Network steering committee (n=15); and to private members of the Rehabilitation Network nominated by ACI. Reminder emails were sent by ACI.

Three members of the ACI Network steering committee provided feedback on the initial draft of the survey to ensure appropriateness of the survey items: Barbara Strettles, Network Manager, Brain Injury Rehabilitation Directorate (ACI); Denise Young, Program Manager/Social Worker, Mid Western BIRP; and Margaret Doyle, Rehabilitation Case Manager, Westmead Brain Injury Rehabilitation Service.

All members of the ACI Network steering committee (n=15) had an opportunity to provide feedback about the survey during a teleconference of the ACI Network steering committee members. Comments were incorporated and the survey finalised (Attachment 1).

The survey was intended to be completed by ACI Network steering committee members working in BIRP services in collaboration with other case managers from their service; and private members of the Rehabilitation Network nominated by ACI in collaboration with other case managers from their service.

1.3 Background to the survey

Case management in BIRP is a collaborative process involving the coordination, rehabilitation, care and support of people with complex clinical needs admitted to BIRP services following an acquired brain injury. It aims to facilitate clients' independence and improve their quality of life.

A recent report developed by the ACI Brain Injury Rehabilitation Directorate case management steering committee¹ describes the BIRP model of case management including the aims, principles and definition; as well as the 10 core elements of the BIRP model that have been benchmarked against the generic core standards of the Case Management Society of Australia. The client centred goal planning approach used in BIRP services supports a practical framework for BIRP case managers to provide integrated care that exceeds the national standards.

The principles of BIRP case management are that it is: needs driven; goals directed; community based; participation focused and; that it recognises family as members of the rehabilitation team.

The 10 core elements of BIRP case management intervention are:

Assessment - Complete holistic assessments at referral and subsequent key points

Goal setting and support planning - Develop client centred, needs based goals using clinical reasoning and in liaison with all relevant stakeholders

Referral and liaison - Manage access to and support for non-BIRP services

Monitoring and Servicing - Use an interactive process for the purpose of tracking client status during rehabilitation

Individual client work - Use clinical knowledge and expertise to develop support structures that maximize participation by building individual capacity in combination with environmental supports

Advocacy - Undertake individual and systemic advocacy to achieve equity of access to existing resources

Coordination - Manage the involvement of multiple stakeholders to work together as a team

Support of family and social networks - Work collaboratively with families and social networks to support clients in community living and social participation

Education - Provide needs based education to individuals, families/social networks and service systems

Community and service development - Investigate and influence policies and practices to ensure that service systems are responsive to individual and family needs.

Currently, there are no specific training requirements or qualifications for case managers. Because of this, there are no standard training programs or courses. Case manager functions are largely provided by health professionals working in brain injury rehabilitation – usually allied health or registered nurses. Depending on the team structure, case managers may also continue with their clinical role.

ACI is looking to review training resources available with a view to potentially developing new training resources and fill gaps in current knowledge and skills to ensure a confident capable brain injury rehabilitation workforce.

¹ ACI NSW Agency for Clinical Innovation NSW Brain Injury Rehabilitation Program: Case Management, 2015.

2 Results of the survey

2.1 Data analysis of survey results

The results from Survey Monkey were exported to Excel for data analysis. A mixed method approach was used including descriptive statistics of the quantitative data and thematic analysis of the qualitative data.

Below, results are presented from the survey. First, a profile of the survey respondents is given (See Table 1). Secondly, gaps in education and training resources, as identified by case managers themselves are reported. The remaining sections outline resources that are currently in use, divided into two different categories, those that are used for orientation and those that are used for ongoing professional development. Finally, we report on education and training resources that are either in development or in use outside of NSW (other states or internationally).

2.2 Respondents

Nineteen respondents completed the survey in collaboration with case managers from their service. Most respondents (n= 15; 78%) were from the ACI Network Steering Committee (or a case manager from a BIRP service). Three respondents were private members of the Rehabilitation Network (16%). One respondent did not complete the profile information in the survey. Overall, the survey represented 137 case managers working with people with brain injury.

The profile of respondents is outlined in Table 1. The table includes information about whether the respondent is a ACI Network Steering Committee member/from a BIRP service or private member of the Rehabilitation Network; the name of the service; the current position of respondent(s) representing the service; the number of case managers in the service; the time spent on case management for each case manager in the service; and the professional background of case managers.

Table 1: Profile of respondents

	ACI Network Steering Committee member/ BIRP service	Private member of the Rehabilitation Network	Service	Current position of respondent(s) representing the service	Number of case managers in the service	Time spent on case management	Professional background of case managers*
1	x		Westmead Brain Injury Rehabilitation Service, Outreach Team	Rehabilitation Case Managers	5 1 vacant position	All case managers: More than 75%	Allied health rehab (n=2) Allied health psychosocial (n=3)
2	x		Mid Western BIRP	Program Manager	6	More than 75% (n=1) 51-75% (n=2) Half (n=2) 25-49% (n=1)	Allied health rehab (n=5) Allied health psychosocial (n=1)
3	x		Brain Injury Services, The Children's Hospital Westmead	Coordinator	15	More than 75% (n=5) 25-49% (n=1) Less than 25% (n=9)	Case manager (n=5) Allied health rehab (n=6) Allied health psychosocial (n=4)
4	x		Southern Area Brain Injury Service	Acting SABIS Manager	6	More than 75% (n=2) 51-75% (n=2) 25-49% (n=1) Less than 25% (n=1)	Case manager (n=2) Allied health rehab (n=1) Allied health psychosocial (n=3)

ACI Network Steering Committee member/ BIRP service	Private member of the Rehabilitation Network	Service	Current position of respondent(s) representing the service	Number of case managers in the service	Time spent on case management	Professional background of case managers*
5	x	Illawarra Brain Injury Service	Speech Pathologist	7	More than 75% (n=2) 51-75% (n=2) half (n=3)	Allied health rehab (n=4) Allied health psychosocial (n=2) Nursing (n=1)
6	x	South West Brain Injury Rehabilitation Service	Clinical Team Leader	14	More than 75% (n=2) Half (n=9) 25-49% (n=3)	Case managers (n=2) Allied health rehab (n=12)
7	x	Mid North Coast Brain Injury Rehabilitation Service	Team Leader/OT/Community Rehabilitation Clinician	7	More than 75% (n=1) 51-75% (n=5) Less than 25% (n=1)	Allied health rehab (n=6) Allied health psychosocial (n=1)
8	x	Not provided	Case Manager/Clinical Neuropsychologist	6	51-75% (n=1) Half (n=1) Less than half (n=4)	Allied health rehab (n=3) Allied health psychosocial (n=2) Nursing (n=1)
9	x	Northern Brain Injury Rehabilitation Service	Rehabilitation Coordinators	3	More than 75% (n=3)	Allied health rehab (n=2) Allied health psychosocial (n=1)

ACI Network Steering Committee member/ BIRP service	Private member of the Rehabilitation Network	Service	Current position of respondent(s) representing the service	Number of case managers in the service	Time spent on case management	Professional background of case managers*
10	x	Brain Injury Service, Royal Rehab	Rehabilitation Case Managers	4	More than 75% (n=4)	Allied health rehab (n=2) Allied health psychosocial (n=2)
11	x	Dubbo BIRP	Manager	4	More than 75% (n=2) 51-75% (n=2)	Allied health rehab (n=2) Allied health psychosocial (n=1) Nursing (n=1)
12	x	Liverpool BIRU	Case Manager	7	More than 75% (n=5) Half (n=1) Less than 25% (n=1)	Allied health rehab (n=1) Allied health psychosocial (n=3) Nursing (n=3)
13	x	New England Brain Injury Rehabilitation Service	Rehabilitation Case Manager	6	More than 75% (n=3) Half (n=3)	Allied health rehab (n=4) Allied health psychosocial (n=2)
14	x	Hunter Brain Injury Service (HBIS)	Speech Pathologist / Case manager	14	More than 75% (n=3) 25-49% (n=3) Less than 25% (n=8)	Allied health rehab (n=7) Allied health psychosocial (n=7)

ACI Network Steering Committee member/BIRP service	Private member of the Rehabilitation Network	Service	Current position of respondent(s) representing the service	Number of case managers in the service	Time spent on case management	Professional background of case managers*
15	x	Private practitioner	Private clinical case manager	1	25-49% (n=1)	Allied health rehab (n=1)
16	x	Access brain injury services	Case manager	11	More than 75% (n=11)	Allied health rehab (n=10) Nursing (n=1)
17	x	Keystone Professionals	Principal Occupational Therapist	20 Across jurisdictions	50-75% (N=20)	Allied health rehab Allied health psychosocial (Numbers not provided)
18	x	Everyday Independence	Operations Manager	4	More than 75% (n=1) 25-49% (n=1) Half (n=2)	Allied health rehab (n=4)

* Note, allied health rehab refers to Occupational therapist, physiotherapist, speech pathologist, rehabilitation counsellor. Allied health psychosocial refers to social work, social welfare and psychology.

2.3 WRITTEN RESOURCES

2.3a Orientation program

Respondents in collaboration with case managers in their service were asked what types of written resources had they used (or were aware of) for case managers working with people with brain injury as part of the orientation program. Written resources included internal documents, booklets, pamphlets, books, chapters and information from websites.

The results are highlighted in Figure 1 and Table 2. The types of written resources for case managers working with people with brain injury as part of the orientation program that were most available across services or that respondents were most aware of included: written resources developed by the individual services; written resources accessed via www.tbistafftraining.info; and other written resources (see below). The results also show that the availability and/or awareness of the types of written resources for case managers working with people with brain injury as part of the orientation varies between services.

Figure 1: Written resources as part of the orientation program

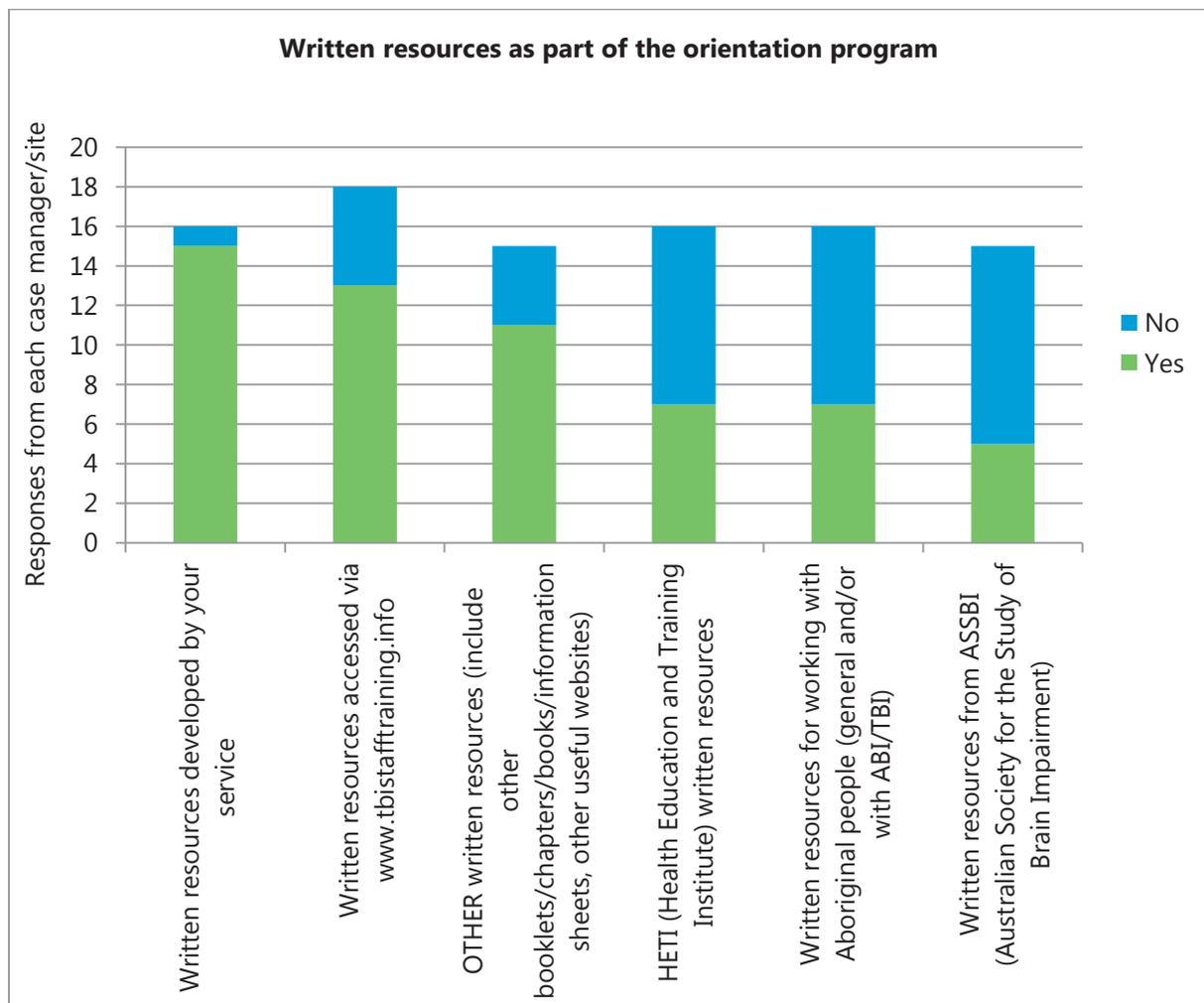


Table 2: Written resources as part of the orientation program

Written resources as part of the orientation program	Yes	No
Written resources developed by your service	15	1
Written resources accessed via www.tbistafftraining.info	13	5
OTHER written resources (include other booklets/chapters/books/information sheets, other useful websites)	11	4
HETI (Health Education and Training Institute) written resources	7	9
Written resources for working with Aboriginal people (general and/or with ABI/TBI)	7	9
Written resources from ASSBI (Australian Society for the Study of Brain Impairment)	5	10

2.3b Ongoing professional development

Respondents in collaboration with case managers in their service were asked what types of written resources had they used (or were aware of) for case managers working with people with brain injury as part of ongoing professional development. Written resources included internal documents, booklets, pamphlets, books, chapters and information from websites.

The results are highlighted in Figure 2 and Table 3. The types of written resources for case managers working with people with brain injury as part of ongoing professional development that were most available across services or that respondents were most aware of included: written resources accessed via www.tbistafftraining.info; written resources developed by the individual services; and other written resources (see below). The results also show that the availability and/or awareness of the types of written resources for case managers working with people with brain injury as part of ongoing professional development varies between services.

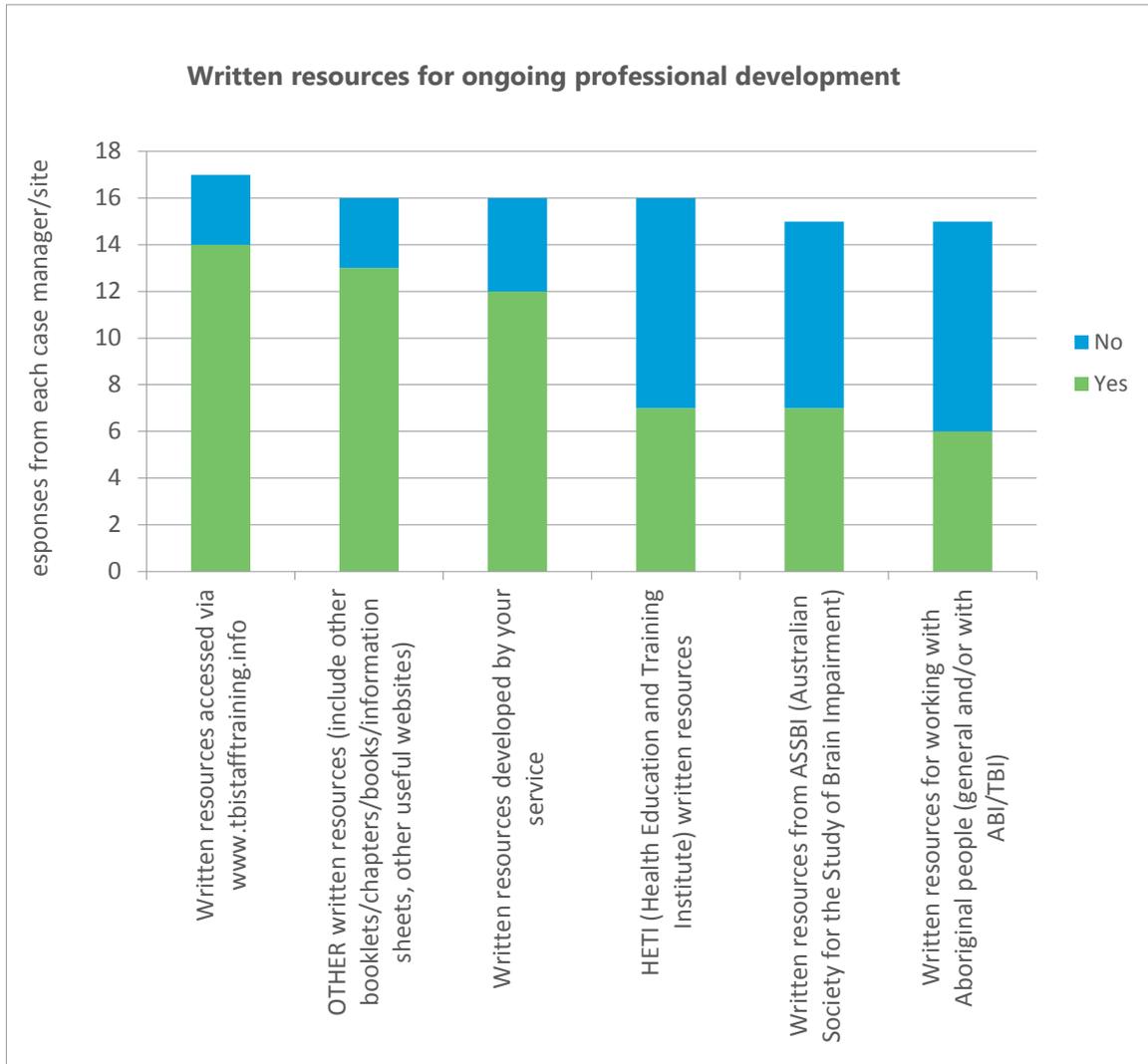


Figure 2: Written resources for ongoing professional development

Table 3: Written resources for ongoing professional development

Written resources for ongoing professional development	Yes	No
Written resources accessed via www.tbistafftraining.info	14	3
OTHER written resources (include other booklets/chapters/books/information sheets, other useful websites)	13	3
Written resources developed by your service	12	4
HETI (Health Education and Training Institute) written resources	7	9
Written resources from ASSBI (Australian Society for the Study of Brain Impairment)	7	8
Written resources for working with Aboriginal people (general and/or with ABI/TBI)	6	9

2.3c Description of the written resources used in the orientation program and for ongoing professional development

BIRP services reported that many of the resources used as part of the orientation program were also used for ongoing professional development. A description of the organisations that provide written resources used in the orientation program and for ongoing professional development is provided in Table 4.

Table 4: Written resources used in the orientation program and for ongoing professional development

Written resources used in the orientation program and for ongoing professional development

Written resources developed by individual services

e.g., Orientation folder developed by SWBIRS with relevant TBI readings; SWBIRS handouts for children; Westmead BIRS (annual reports, BIRS info pack fact sheets for clients, brochures & Road Ahead videos); and Royal Rehab RCM orientation folder which includes a "how to" on day to day tasks; The Hunter Brain Injury Service (HBIS) case management checklist

Written resources developed by ACI and accessed via www.tbistafftraining.info

e.g., ACI BIRP Model of case management; Includes case management, brain injury and transition resources; ACI BIRD and Rehabilitation, Goal Training and further developments for implementation; Transition Folder ACI: The Next Step; TBI Management Resource Manual; and ACI Classification Tool

HETI (Health Education and Training Institute) online written resources www.heti.nsw.gov.au

Written resources from ASSBI (Australian Society for the Study of Brain Impairment) www.assbi.com.au

- Brain Impairment journal
- eNewsletters
- Online resources

Written resources for working with Aboriginal people (general not ABI/TBI specific)

- As part of HETI training
- As part of NSW Health training
- Research conducted within the BIRD (rural and remote)

Written resources from NSW Health

- As part of NSW Health mandatory recruitment training program
- Kids NSW Information sheets

Written resources from the Case Management Society of Australia & New Zealand (CMSA) www.cmsa.org.au

Case Management Society UK (CMSUK) www.cmsuk.org Case Management Society of America (CMSA) www.cmsa.org

Written resources from the Program of Experience in the Palliative Approach (PEPA) www.pepaeducation.com

Written resources from Brain Injury Australia (BIA) (information resources for clients) and journals (Synapse, Bridge) www.braininjuryaustralia.org.au

Written resources from Lifetime Care & Support (LTCS) www.lifetimecare.nsw.gov.au

Written resources from Motor Accident Authority (MAA) www.maa.nsw.gov.au

Written resources from Active Assistance www.activeassistance.com

Written resources from the Centre for Disability studies www.cds.org.au

Written resources provided from Comcare www.comcare.gov.au

Written resources provided from NSW WorkCover www.workcover.nsw.gov.au

Written resources from Network Case Management Services (e.g., newsletters, online material) www.networkcms.com.au

Written resources from the Black Dog Institute www.blackdoginstitute.org.au

Written resources from ARBIAS www.arbias.org.au

Written resources from professional bodies and networks

e.g., Australian Psychology Society www.psychology.org.au Occupational Therapy Australia www.otaus.com.au Occupational Therapy Network www.ot-network.com.au Australian Society of Rehabilitation Counsellors Inc. (ASORC) www.asorc.org.au NSW Law Society www.lawsociety.com.au The Institute of Arbitrators & Mediators Australia | LEADR www.iama.org.au

Written resources from Family and Community Services – NSW Government www.facs.nsw.gov.au

Written resources from Legal Aid NSW www.legalaid.nsw.gov.au

Written resources from Centrelink – Department of Human Services

www.humanservices.gov.au/customer/dhs/centrelink

Written resources from Ageing, Disability and Home Care (ADHC) www.adhc.nsw.gov.au

Written resources from NADA (Network of Alcohol and Drug Agencies) www.nada.org.au

Written resources from Complex Needs Capable www.complexneeds capable.org.au

Written resources from the Brief Therapy Institute of Sydney (BTIS) www.briefsolutions.com.au

Books/Guides

- Traumatic brain injury rehabilitation for everyday adaptive living, Jennie Ponsford, Sue Sloan, and Pam Snow-2nd ed.
- The Neuropsychology of Everyday Life: Issues in Development and Rehabilitation, edited by David E. Tupper, Keith D. Cicerone
- WHO Case Management Taxonomy: Lukersmith, S., Fernandez, A., Millington, M., Salvador-Carulla, L., on behalf of the CM Nominal Group (2015)
- Understanding and living With a Brain Injury (author not reported)
- Over My Head, Claudia L. Osborne
- Doing Up Buttons , Christine Durham
- Paper Cranes, Cheryl Koenig
- A Brief Guide to Brief Therapy, Brain Cade
- Solution Focused Brief Therapy resource with training by Michael Durrant
- Whatever It Takes model, Barry Willer
- Traumatic Brain Injury Rehabilitation: Children and Adolescents, Ylvisaker
- Collaborative Brain Injury Intervention: Positive Everyday Routines, Ylvisaker with Tim Feeney.
- Neuropsychological Management of Mild Traumatic Brain Injury 1st Edition by Sarah A. Raskin and Catherine A. Mateer
- Good Practice in Brain Injury Case Management by Jackie Parker (Ed) 2006

DVDs e.g., The Road Ahead Copies from Westmead BIRS

Lash and Co publications from the US (details not reported)

UK Headway publications www.headway.org.uk

2.4 TRAINING

2.4a Training as part of the orientation program

Respondents in collaboration with case managers in their service were asked what types of training had they been involved in (or were aware of) for new case managers working with people with brain injury as part of the orientation program in their service.

The results are highlighted in Figure 3 and Table 5. The types of training as part of the orientation program that were most available across services or that respondents were most aware of included: training accessed via www.tbistafftraining.info; mentorship programs; goal training; and training developed by the individual services. The results also show that the availability and/or awareness of the types of training for new case managers working with people with brain injury varies between services.

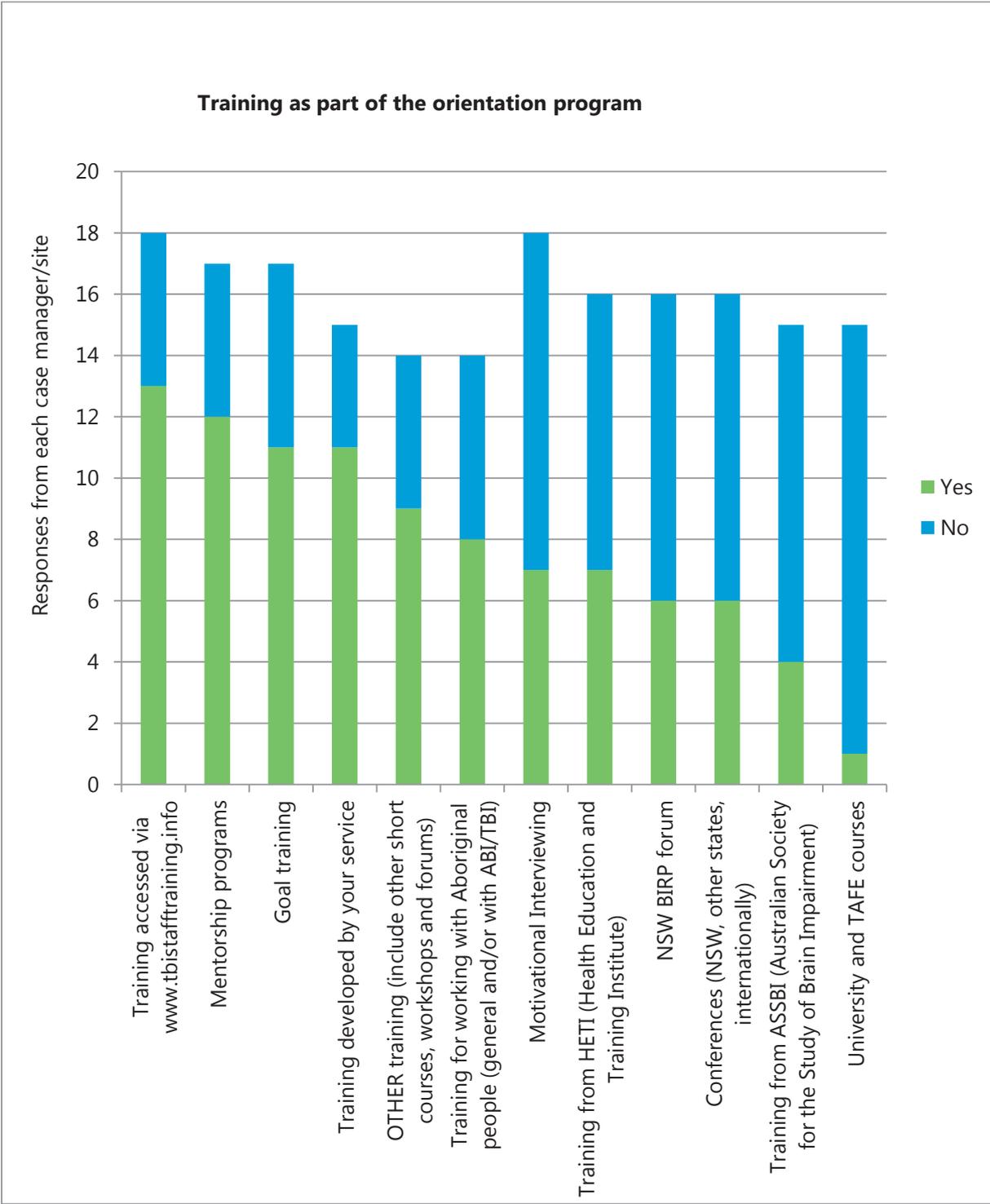


Figure 3: Training as part of the orientation program

Table 5: Training as part of the orientation program

Types of training as part of the orientation program	Yes	No
Training accessed via www.tbistafftraining.info	13	5
Mentorship programs	12	5
Goal training	11	6
Training developed by your service	11	4
OTHER training (include other short courses, workshops and forums)	9	5
Training for working with Aboriginal people (general and/or with ABI/TBI)	8	6
Motivational Interviewing	7	11
Training from HETI (Health Education and Training Institute)	7	9
NSW BIRP forum	6	10
Conferences (NSW, other states, internationally)	6	10
Training from ASSBI (Australian Society for the Study of Brain Impairment)	4	11
University and TAFE courses	1	14

2.4b Training for ongoing professional development

Respondents in collaboration with case managers in their service were asked what types of training had they been involved in (or were aware of) for case managers working with people with brain injury as part of ongoing professional development. The results are highlighted in Figure 4 and Table 6. The types of training for case managers working with people with brain injury as part of ongoing professional development that were most available across services or that respondents were most aware of included: goal training; motivational interviewing; NSW BIRP forum; training from HETI (Health Education and Training Institute); and training accessed via www.tbistafftraining.info. The results also show that the availability and/or awareness of the types of training for case managers working with people with brain injury as part of ongoing professional development varies between services.

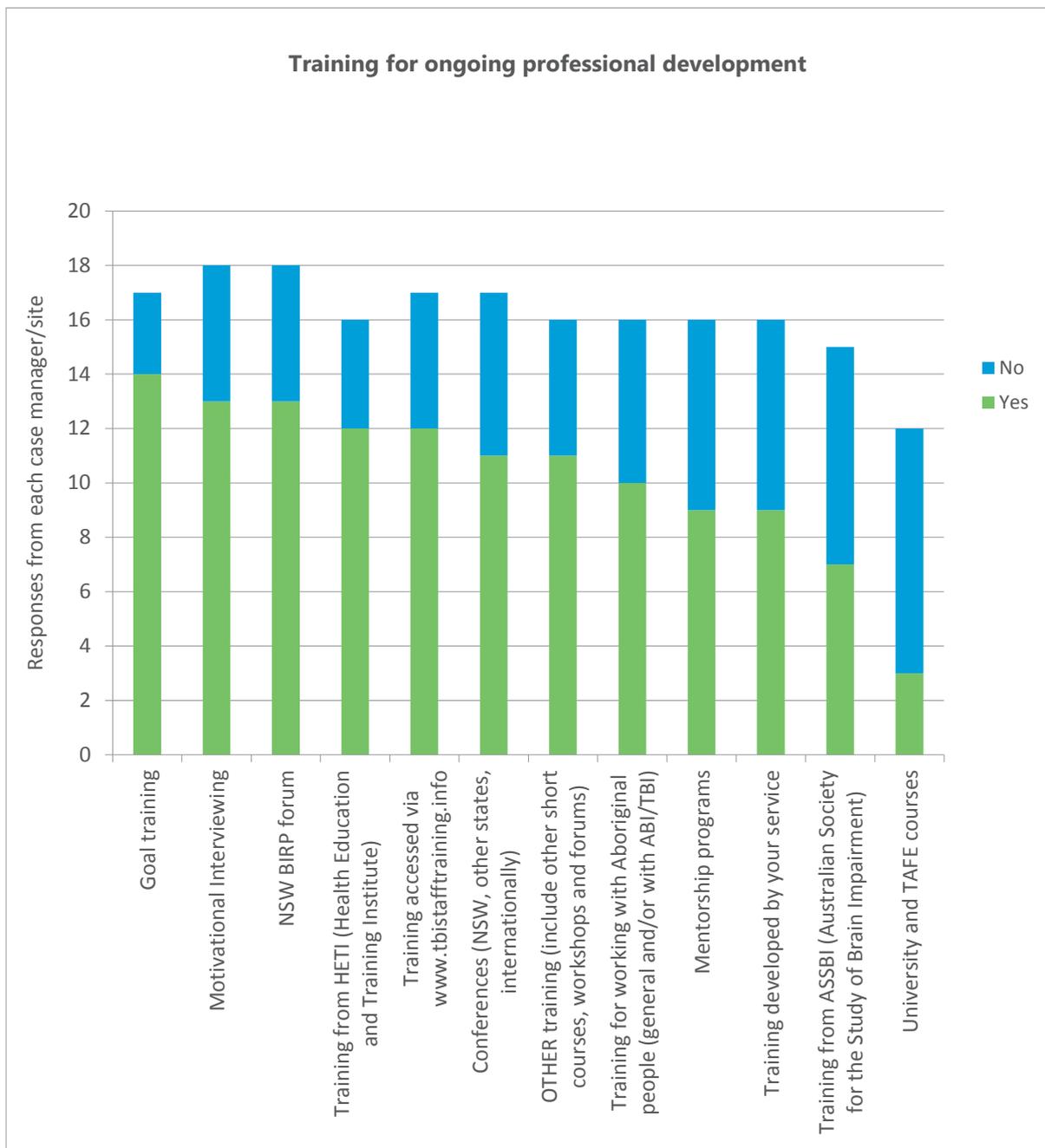


Figure 4: Training for ongoing professional development

Table 6: Training for ongoing professional development

Training for ongoing professional development	Yes	No
Goal training	14	3
Motivational Interviewing	13	5
NSW BIRP forum	13	5
Training from HETI (Health Education and Training Institute)	12	4
Training accessed via www.tbistafftraining.info	12	5
Conferences (NSW, other states, internationally)	11	6
OTHER training (include other short courses, workshops and forums)	11	5
Training for working with Aboriginal people (general and/or with ABI/TBI)	10	6
Mentorship programs	9	7
Training developed by your service	9	7
Training from ASSBI (Australian Society for the Study of Brain Impairment)	7	8
University and TAFE courses	3	9

2.4c Description of the training used in the orientation program and for ongoing professional development

BIRP services reported that many of the resources used as part of the orientation program were also used for ongoing professional development. A description of the organisations that provide training used in the orientation program and for ongoing professional development is provided in Table 7.

Table 7: Training used in the orientation program and for ongoing professional development

Training used in the orientation program and for ongoing professional development
<p>Training developed by individual services</p> <p>e.g., In service program: feedback from conferences at departmental level; the team provides internal informal mentoring support for case management skills development; information is shared within the organisation as ongoing professional development; BIRP orientation programme – meeting with different professionals; and buddying & joint home visits; Royal Rehab Mandatory training / orientation; HNE Health Orientation training; Goal training inhouse; Informal mentoring programme through HBIS; Informational supervision and mentoring; and the team is aiming to have a two day workshop with David Manchester on “neurocognitive rehabilitation skills for people with TBI”.</p>
<p>Training by ACI and BIRP</p> <ul style="list-style-type: none"> • NSW BIRP forums • Training accessed via www.tbistafftraining.info • Workshops e.g., Goal training, motivational interviewing, Tim Feeney workshops
<p>University, colleges and TAFE</p> <ul style="list-style-type: none"> • Charles Sturt ABI training modules • Bachelor of Community Services at Charles Sturt University • Diploma of Community Services (Case Management) at Australian College of Applied Psychology (ACAP)
<p>Training from HETI (Health Education and Training Institute) www.heti.nsw.gov.au</p> <ul style="list-style-type: none"> • Training on work processes for coordinating client care, team work and working with Aboriginal

-
- people, CORE chat
 - No training for case management

Training from ASSBI (Australian Society for the Study of Brain Impairment) www.assbi.com.au

- Conferences and webinars
- Workshops
- Other relevant non-ASSBI national and international conferences (information on ASSBI website)

Training for working with Aboriginal people (general not ABI/TBI specific)

- As part of HETI training
- As part of NSW Health training
- As part of LHD training

Training from NSW Health (As part of NSW Health mandatory recruitment training program)

Training from the Case Management Society of Australia & New Zealand (CMSA) www.cmsa.org.au Case Management Society UK (CMSUK) www.cmsuk.org Case Management Society of America (CMSA) www.cmsa.org

Training from the Program of Experience in the Palliative Approach (PEPA) www.pepaeducation.com

Training from Brain Injury Australia (BIA) www.braininjuryaustralia.org.au

Training from Lifetime Care & Support (LTCS) www.lifetimecare.nsw.gov.au

Training from Motor Accident Authority (MAA) www.maa.nsw.gov.au

Training from Active Assistance www.activeassistance.com

Training from the Centre for Disability studies www.cds.org.au

Training provided from Comcare www.comcare.gov.au

Training provided from NSW WorkCover www.workcover.nsw.gov.au

Training from Network Case Management Services www.networkcms.com.au

Training from the Black Dog Institute www.blackdoginstitute.org.au

Training from ARBIAS www.arbias.org.au

Training from professional bodies and networks such as workshops and conferences

e.g., Australian Psychology Society www.psychology.org.au Occupational Therapy Australia www.otaus.com.au Occupational Therapy Network www.ot-network.com.au Australian Society of Rehabilitation Counsellors Inc. (ASORC) www.asorc.org.au NSW Law Society www.lawsociety.com.au The Institute of Arbitrators & Mediators Australia | LEADR www.iama.org.au

Training from Family and Community Services – NSW Government www.facs.nsw.gov.au

Training from Legal Aid NSW www.legalaid.nsw.gov.au

Training from Centrelink – Department of Human Services www.humanservices.gov.au/customer/dhs/centrelink

Training from MLR consulting psychology www.mlropsych.com

Training from NADA (Network of Alcohol and Drug Agencies) www.nada.org.au

Training from Headspace www.headspace.org.au

Training from Community Restorative Centre (CRC) www.crcnsw.org.au

Training from The Brief Therapy Institute of Sydney (BTIS) www.briefsolutions.com.au e.g., Solution Focused Brief Therapy workshop by Michael Durrant

Conferences by National Rural Health Alliance www.ruralhealth.org.au

Patient Reported Outcomes Measurement Information System (PROMIS) www.nihpromis.org international courses and conferences

2.5 Summary of the education and training resources as part of the orientation program and for ongoing professional development

Education and training resources as part of the orientation program and for ongoing professional development reported by case managers in this survey include resources developed by individual services and from the following organisations:

- ACI and accessed via www.tbistafftraining.info
- HETI (Health Education and Training Institute) www.heti.nsw.gov.au
- ASSBI (Australian Society for the Study of Brain Impairment) www.assbi.com.au
- NSW Health - As part of NSW Health mandatory recruitment training program; and Kids NSW Information sheets
- The Case Management Society of Australia & New Zealand (CMSA) www.cmsa.org.au Case Management Society UK (CMSUK) www.cmsuk.org Case Management Society of America (CMSA) www.cmsa.org
- The Program of Experience in the Palliative Approach (PEPA) www.pepaeducation.com
- Brain Injury Australia (BIA) www.braininjuryaustralia.org.au
- Lifetime Care & Support (LTCS) www.lifetimecare.nsw.gov.au
- Motor Accident Authority (MAA) www.maa.nsw.gov.au
- Active Assistance www.activeassistance.com
- The Centre for Disability studies www.cds.org.au
- Comcare www.comcare.gov.au
- NSW WorkCover www.workcover.nsw.gov.au
- Network Case Management Services (e.g., newsletters, online material) www.networkcms.com.au
- The Black Dog Institute www.blackdoginstitute.org.au
- ARBIAS www.arbias.org.au
- Professional bodies and networks e.g., Australian Psychology Society www.psychology.org.au Occupational Therapy Australia www.otaus.com.au Occupational Therapy Network www.ot-network.com.au Australian Society of Rehabilitation Counsellors Inc. (ASORC) www.asorc.org.au NSW Law Society www.lawsociety.com.au The Institute of Arbitrators & Mediators Australia | LEADR www.iama.org.au
- Family and Community Services - NSW Government www.facs.nsw.gov.au
- Legal Aid NSW www.legalaid.nsw.gov.au
- Centrelink - Department of Human Services www.humanservices.gov.au/customer/dhs/centrelink
- Ageing, Disability and Home Care (ADHC) www.adhc.nsw.gov.au
- NADA (Network of Alcohol and Drug Agencies) www.nada.org.au
- Complex Needs Capable www.complexneeds capable.org.au
- Headspace www.headspace.org.au
- Community Restorative Centre (CRC) www.crcnsw.org.au
- The Brief Therapy Institute of Sydney (BTIS) www.briefsolutions.com.au
- UK Headway publications www.headway.org.uk
- National Rural Health Alliance www.ruralhealth.org.au
- Patient Reported Outcomes Measurement Information System (PROMIS) www.nihpromis.org

2.6 Gaps in the education and training resources for case managers

Respondents in collaboration with case managers in their service were asked about the adequacy of the education and training resources to fulfil their role as case managers.

Eighty-one percent (n=91) of the 111 case-managers who were represented in this question reported that they had adequate education and training resources to fulfil their role as a case manager.

The comments in Table 8 highlight that although most people felt competent to fulfil their role as case managers, they felt that they would benefit from additional education and training resources.

Table 8: Comments about the gaps in the education and training resources for case managers

Comments about the gaps in the education and training resources for case managers
<ul style="list-style-type: none">• We can all fulfil our role therefore adequate but would benefit from more training.
<ul style="list-style-type: none">• Resources are sourced from a range of places. Although I have found them "adequate", there is plenty of scope for more.
<ul style="list-style-type: none">• Sometimes we don't know what we don't know! There may be many things e.g., training or resources out there that we're unaware of.
<ul style="list-style-type: none">• Top up of access to resources as the period of time in the position increases - can always learn new ways of doing or seeing things.
<ul style="list-style-type: none">• A flow chart available for down load or use that would include all areas that could/should be considered for each of the core elements / stages of case management. This resource would act as a "check" for review by case managers when considering a person's situation.
<ul style="list-style-type: none">• All training should have multiple components - an on line component and ALSO a face to face component. The on line material helps you prepare knowledge and thinking about the issue / skill and think about the context and the face to face component enables interactive consideration of issues and discussion with peers. Such workshops should be offered twice a year to supplement / enhance the online component. Online material alone can be "raced through without consideration", competitions can be held about whether you can complete successfully without actually reading the material or doing the work. Consideration should also be given to having a creative discussion about how to make things work in the rural context - how can there be interaction and consolidation of the material. An example of useful course is the "Respecting the Difference" Training in NSW Health - good on line content with videos and scenarios and excellent work book supported by face to face workshops.
<ul style="list-style-type: none">• Limited resources upon commencement.
<ul style="list-style-type: none">• Most of the training is internal to the unit and is related to mentoring. Staff report that they would prefer a more formalised training system for case management.
<ul style="list-style-type: none">• There should be consistency of education and training resources across teams and across BIRP programs.

2.7 Priority resources for case managers

Respondents in collaboration with case managers in their service were asked to consider the 10 elements of the BIRP case management intervention and their own experience working in the brain injury field and suggest education and training resources that should be developed to better support case managers working with people with brain injury.

The education and training resources that were reported by respondents as priority resources are outlined in the Table 9 below. The education and training resources were categorised into key content areas:

- Resources to improve knowledge of the education system and issues for working with students with brain injuries
- Resources to improve knowledge about cultural issues in relation to people with brain injuries
- Resources to improve knowledge about mental health issues/drug and alcohol issues in relation to people with brain injury
- Written resources to distribute to clients and their families about brain injury and related issues including Aboriginal specific resources
- Resources to improve knowledge about how to support the family and friends of people with brain injury
- Resources to improve knowledge about neuroplasticity and recovery
- Resources to increase skills in encouraging self-advocacy in clients
- Resources to improve knowledge about community agencies and the services they provide
- Resources to improve communication with community agencies
- Resources to improve motivational interviewing skills and discussing difficult issues
- Case management competency training; and guidelines about the case manager role
- Resources related to assessment for BIRP case managers
- Resources to improve peer supervision
- Resources to increase facilitation and team work skills; and engaging stakeholders
- Resources to increase knowledge of standardised assessment measures
- Resources to improve knowledge about alternative funding sources
- Resources to improve knowledge about medico-legal issues transitioning patients to overseas services

Respondents suggested that the education and training should largely be multi-component, that is, include written resources, on-line resources and training e.g., workshops and courses.

The type of resource and the description of suggested resources /other comments are also provided in Table 9.

Table 9: Priority resources for case managers

Content of education and training resources	Type of resource	Description of suggested resources /other comments
Resources to improve knowledge of the education system and issues for working with students with brain injuries	Written resources; and training e.g., workshops and courses	<ul style="list-style-type: none"> • Interface between/with education system - both at orientation level and more experienced level • Working with schools • Need information about how the education system works at various levels, how to get the most out of it for students with brain injuries, how to influence staff, how to educate about what is the impact of brain injury and not "all boys at that age have ..."
Resources to improve knowledge about cultural issues in relation to people with brain injuries	Written resources; training e.g., workshops and courses; and on-line resources	<ul style="list-style-type: none"> • Cultural Protocols Training - practical and specific guides to assist working with all clients and their families / local community - where cultural overlay's (beliefs / values etc.) may make elements of case management more complex (and so EBP can be aligned to the cultural protocols in order to optimise outcomes) • Workshop with culture specific specialists in the area may provide great traction of information, and may allow for two way discussion / interaction, to aid learning / knowledge / skill development • Cultural awareness training • Resource should be more comprehensive than how to 'work with interpreters'. A booklet / guide / web link would also be helpful for ongoing reference
Resources to improve knowledge about mental health issues/drug and alcohol issues in relation to people with brain injury	Written resources; training e.g., workshops and courses; and on-line resources	<ul style="list-style-type: none"> • Mental health training • Working with TBI clients with Mental Health issues/drug & alcohol - practical travelling training workshop
Written resources to distribute to clients and their families about brain injury and related issues including Aboriginal specific resources	Written resources e.g., pamphlets; online resources; and USB sticks/DVD	<ul style="list-style-type: none"> • Brochures/booklets/info sheets to distribute to clients/families/service providers etc • Family education resource - development of "raft" of resources for family/sibling for paed's - website based • USB sticks/DVD's on TBI suitable for clients and families to give away- specific aboriginal info
Resources to improve knowledge about how to support the family and friends of people with brain injury	Training e.g., workshop, short courses	<ul style="list-style-type: none"> • Support of family and social networks • What fits in our domain - what is beyond our scope? • Working with complex families as a case manager
Resources to improve knowledge about neuroplasticity and recovery	Written resources/ training	<ul style="list-style-type: none"> • Education around neuroplasticity and recovery
Resources to increase skills in encouraging self-advocacy in clients	Training e.g., workshops	<ul style="list-style-type: none"> • Encouraging self-advocacy in clients-- partner with BIA NSW for a client/staff training

Resources related to improve knowledge about community agencies and the services they provide	Training e.g., workshops and courses; and on-line resources	<ul style="list-style-type: none"> • Related to Lifetime Care (LTC) and National Disability Insurance Scheme (NDIS) • Advocacy - possibly around accidental counselling and also increasing knowledge of appropriate services and how to access • Guide re resources and how to find additional ones • More information about local resources and local contact agencies • More awareness of key on-line resources and data bases for access to constantly update services in the community • There is a gap in case management training in that resources in the community are constantly changing (e.g., ADHC, accommodation services) and the capacity to have current up to date resources is time consuming • Resources related to supported accommodation options for people with brain injury (? Similar to PEPA training and resource manual)
Resources to improve communication with community agencies	Training e.g., workshops and courses; and on-line resources	<ul style="list-style-type: none"> • Increasing use of telehealth and linking with community in alternate methods • Working with non-BIRP case managers under insurance schemes (forum) • Coordination - mainly around linking with external services. Also around communicating with external services and external case managers • In the absence of a social worker- would be good to have online training on negotiating Centrelink, legal advocacy
Resources to improve motivational interviewing skills and discussing difficult issues	Training e.g., workshops and courses; and on-line resources with case study examples	<ul style="list-style-type: none"> • How to use motivational interviewing to best effect with people with brain injuries so they can be persuaded to try new things • How to have difficult conversations (e.g. dealing with the consequences of restriction on drivers licences; advocacy and guardianship issues)
Case management competency training and guidelines about the role of the case manager	Training e.g., workshops and courses; on-line resources; and written resources e.g., flow-chart	<ul style="list-style-type: none"> • Case management (national certification) competency training • Tracking process / flow chart - how to get your head together about case management steps and processes - and not just the LTCS process • Clearer guidelines on the role of case manager and expectations of the outcome of the role and how to do this effectively • Would be good to know more about boundaries around case management • Would be good to know more about the enabling framework for case management • Is there scope for consideration of Case Management Society competencies with additional content for BIRP?
Resources related to assessment for BIRP case managers		<ul style="list-style-type: none"> • Holistic Assessment • What assessments are case managers required to complete

Resources to improve peer supervision	Training/ teleconferences	<ul style="list-style-type: none"> Regular peer supervision sessions
Resources to increase facilitation and team work skills; and engaging stakeholders	Training e.g., workshops	<ul style="list-style-type: none"> Coordination/Facilitating team work Ensuring buy-in of other stakeholders
Resources to increase knowledge of standardised assessment measures		<ul style="list-style-type: none"> Suite of recommended, standardised assessment measures for a range of issues that clients might present with - to assist measurement of outcomes
Resources to improve knowledge about alternative funding sources	Training e.g., workshops; online resources; written resources e.g., handbook	<ul style="list-style-type: none"> Alternative funding sources outside of insurance schemes
Resources to improve knowledge about medico-legal issues transitioning patients to overseas services	Training e.g., workshops	<ul style="list-style-type: none"> Training on medico-legal issues transitioning patients to overseas services

Respondents in collaboration with case managers in their service were asked whether they had any further comments about the education and training resources for case manager or perceived gaps in resources. The comments are shown in the Table 10.

Table 10: Further comments about the education and training resources for case manager or perceived gaps in resources

Further comments about the education and training resources for case manager or perceived gaps in resources

- Staff members would really like a spreadsheet / electronic system that would enable them to track their work within variables and parameters - some prompt process and way of documenting the process.
- With continuing professional development we look to many different areas for training opportunities so as to broaden our knowledge base and as a result can integrate many principles across our work areas (an example being mediation training - as this can assist with many complex interactions that may be involved with case management activities).
- Participation at Camp Go Ahead is a great way of new case manager networking and meeting the wide range of challenges young people with a brain injury face. It's a great learning ground.
- Many case managers come into BIRP positions with no case management experience or specific training. Regular training online or face to face would be beneficial to ensure consistency of approach and quality within BIRP. Important to market to LTCS and MAA.
- I think that I have assumed that there is a core knowledge and skill set that people with several years of experience in rehabilitation bring to the role where case management is offered. This knowledge includes assessment skills, reporting and documentation, knowledge of medical terminology and implications of various diagnoses, client engagement, and family education. Without these skills, it would be a requisite core training.
- We have an internal resource spreadsheet which we try to keep up to date but usually start with internet resources to seek current resources and share knowledge within the team.
- Due to health limitations in use of technology, case managers are limited in access to and knowledge of how to utilise latest technologies.
- Different requirements of different funding bodies (LTCS vs. WC, vs CTP etc)- constantly changing.

-
- Lot of resources for working with Lifetime Care, less for working with non-compensation.
 - Rural case managers have limited access to training opportunities due to cost of course; travel and accommodation.
 - Training is accessed online and this is problematic due to issues with health service technology/policy.
 - It would be beneficial to gain insight into the role of a case manager within the NDIS, and any training offered / required for this.
 - It appears to be a common theme that there is a need to clarify how to effectively case manage in rural and remote locations where there are large distances and scarcity of local resources. Especially with clients who are not compensated and for whom local allied health services are very limited.
 - Generally staff felt that it would be better to have some more formalised training resources for working in the case management role. They would also prefer a more formalised mentorship programme through the service.
-

Part B: National and international education and training resources for case managers

1 Introduction and methodology

The Agency for Clinical Innovation (ACI) commissioned the Sax Institute to review and report on information about education and training resources for case managers available on three websites nominated by ACI including:

1. British Association of Brain Injury Case Managers (BABICM) <http://www.babicm.org>
2. Case Management Society UK (CMSUK) <http://www.cmsuk.org>
3. Comcare (Australian Government) <http://www.comcare.gov.au>

The scope of education and training resources sought for this report included:

- Online written resources such as guidelines, documents, booklets/pamphlets, information sheets, newsletters, books and chapters
- Training (including online and face-to face training) such as courses, workshops, webinars, forums and conferences
- Information provided on social media such as twitter and Facebook
- Report on access to information on the nominated websites (that is, whether membership is required to access information)

2 Results

2.1 British Association of Brain Injury Case Managers (BABICM)

The BABICM is a professional association established in 1996 to promote the development of case Management in the field of acquired brain injury. BABICM represents the professional interests and concerns of case managers who work with those who have suffered an acquired brain injury or other complex condition which requires co-ordinated rehabilitation, care and support.

BABICM provides the following types of education and training resources:

- BABICM Competency Framework and Standards of Practice
- CMSUK / BABICM Code of Ethics
- workshops, forums and an annual conference
- webinars
- newsboard for relevant articles and reports
- online newsletters
- social media (twitter)

The following resources are available to members only:

- BABICM Competency Framework and Standards of Practice
- news and relevant articles
- members details for networking

Table 11 describes some examples of the education and training resources provided by BABICM. Information has been sourced from the BABICM website <http://www.babicom.org>

Table 11: Education and training resources provided by the British Association of Brain Injury Case Managers (BABICM)

Resources	Examples in 2016
Guidelines	<ul style="list-style-type: none"> • BABICM Competency Framework and Standards of Practice • CMSUK / BABICM Code of Ethics
Workshops	<ul style="list-style-type: none"> • New & Would Be Case Manager event aimed at new case management practitioners and those thinking about becoming case managers • New & Would Be Case Manager Follow up Event focussing on the following issues: <ul style="list-style-type: none"> ○ <i>Your experience to date of the role of case manager</i> ○ <i>Practical issues for the more experienced case manager</i> ○ <i>Expectations of the experienced case manager</i> ○ <i>Managing these expectations</i> ○ <i>Dealing with the potential 'ups and downs' of active case management</i> ○ <i>Working towards achieving your 'Advanced' BABICM membership</i> • Affiliated events: Child Brain Injury Trust: Across the Continuum – rehabilitation following mild, moderate and traumatic brain injury • Affiliated events: BISWG - Two workshops with Dr Grahame Simpson: <ol style="list-style-type: none"> 1. Building resilience among families supporting relatives with acquired brain injury 2. Assessment and management of suicidality after ABI
Forums	<ul style="list-style-type: none"> • CQC Forum to give BABICM colleagues the opportunity to share experiences of the registration and inspection process, as well as the challenges for brain injury case managers and case management organisations in managing compliance issues. • Business Forum to provide the opportunity for BABICM members who are either Directors, owners or hold positions with significant management responsibilities within their case management organisations, to get together and discuss shared ideas and explore common issues. All those attending will either employ other case managers directly or will contract with them, to provide professional services on behalf of their own organisations.
Conferences	<ul style="list-style-type: none"> • Annual conference: BABICM's 20th Birthday Celebration and Conference: to examine some of the major issues faced by brain injury case managers. • BABICM, CMSUK & VRA Joint Conference. The themes of the conference are use of technology; evidenced based practice; legislation and guidelines; and research and innovation. To be attended by members of the hosting organisations, solicitors, insurers and service providers.
Webinars	<ul style="list-style-type: none"> • Free webinar about the review process to become an advanced member of BABICM

Newsboard	<ul style="list-style-type: none"> • News, relevant articles and reports
Online newsletter	<ul style="list-style-type: none"> • Members only
Social Media	<ul style="list-style-type: none"> • twitter @BABICMorg

2.2 Case Management Society UK (CMSUK)

The Case Management Society UK (CMSUK) is a non-profit association of case managers (incorporated in 2001 and registered as a charity in 2006).

CMUK provides the following types of education and training resources:

- CMSUK Standards of Practice and Best Practice Guidelines
- CMSUK / BABICM Code of Ethics
- CMSUK Standards Audit Tools: The Standards contain audit tools (tick box checklists) so that case managers can regularly monitor their performance, or have the tools available to show to others as a measure of quality
- workshops/study days, forums and an annual conference
- newsboard for news
- online newsletters
- social media (twitter, Facebook and LinkedIn)

The following resources are available to members only:

- editable 'Word' version of the CMSUK Standards Audit Tools
- members details for networking

Table 12 describes some examples of the education and training resources provided by CMUK. Information has been sourced from the CMUK website <http://www.cmsuk.org>

Table 12: Education and training resources provided by the Case Management Society UK (CMSUK)

Resources	Examples in 2016
Guidelines	<ul style="list-style-type: none"> • CMSUK Standards of Practice and Best Practice Guidelines (2009) • CMSUK / BABICM Code of Ethics to provide further guidance on service delivery for case managers
Tools	<ul style="list-style-type: none"> • CMSUK Standards Audit Tools: The Standards contain audit tools (tick box checklists) so that case managers can regularly monitor their performance, or have the tools available to show to others as a measure of quality. Use of the Standards can be incorporated into a business definition and presented as part of CPD requirements.
Workshops/Study Days	<ul style="list-style-type: none"> • Regular Study Days • e.g., CMSUK Study Day 'Specialist Seating & Posture' for case managers and occupational therapists who require more information and understanding on wheelchairs and seats for clients in their homes. The understanding will also include what is available within statutory service provision. The event will be a full day with space for 10 exhibitors. • Affiliated events: Evening Lecture Series which cover a variety of subjects of interest to therapists and will conclude with a discussion session.

Forums	<ul style="list-style-type: none"> • Webex 'lunch & learns' for case managers • See social media (LinkedIn)
Conferences	<ul style="list-style-type: none"> • CMSUK annual conference: In 2016 this is a joint conference: BABICM, CMSUK & VRA Joint Conference. The themes of the conference are use of technology; evidenced based practice; legislation and guidelines; and research and innovation. To be attended by members of the hosting organisations, solicitors, insurers and service providers.
Newsboard	<ul style="list-style-type: none"> • Case management news
Online newsletter	<ul style="list-style-type: none"> • Quarterly newsletters
Social Media	<ul style="list-style-type: none"> • twitter @cmsocietyuk • Facebook • LinkedIn (CMSUK group): for health professionals, case managers, vocational rehabilitation consultants and any other LinkedIn members who are interested in case management. Participating in the CMSUK LinkedIn group gives practitioners access to the latest industry discussions and news. Some of the forum topics include: <ul style="list-style-type: none"> ○ Information about useful toolkits ○ Industry events updates ○ Interesting media articles ○ Government health initiatives updates ○ Back to work information ○ Members seeking other professionals' expertise and advice ○ Advice and tips on good quality case management and practices

2.3 Comcare (Australian Government)

Comcare is established under the Safety Rehabilitation and Compensation Act 1988 (SRC Act). Comcare provides expert advice and services to the Safety, Rehabilitation and Compensation Commission (SRCC) and the Seacare Authority, and manages the Commonwealth's asbestos-related claims liabilities. The SRC Act provides for the rehabilitation of Commonwealth employees following a work related injury. The legislation is designed to make sure the employer (as the rehabilitation authority) is responsible and accountable for the safe and early return of their injured employee.

Comcare provides the following type of education and training resources:

- Safety Rehabilitation Compensation (SRC) courses such as *SRC Act in a day*, *A Rehabilitation Delegates Guide to Case Management (formerly Case management essentials)*, *A Rehabilitation Delegates Guide to Complex Cases (formerly Case management: the next steps)*, and *A Supervisors Role in Early Intervention and Rehabilitation*
- Comcare's Rehabilitation Case Manager Forums
- Comcare National Conference
- *Guidelines for Rehabilitation Authorities 2012 Safety, Rehabilitation and Compensation Act 1988 Section 41*
- *Rehabilitation handbook: Understanding rehabilitation and return to work under the Safety, Rehabilitation and Compensation Act 1988*
- Case manager competencies: framework for case managers
- Fact sheet: What can I do? Rehabilitation case manager

Table 13 describes some examples of the education and training resources provided by Comcare. Information has been sourced from the Comcare website <http://www.comcare.gov.au>

Table 13: Education and training resources provided by Comcare

Resources	Examples in 2016
Safety Rehabilitation Compensation (SRC) courses	<ul style="list-style-type: none"> • <i>SRC Act in a day</i> (Duration: one day): Overview: This course provides participants with an overview of the Safety, Rehabilitation and Compensation Act 1988 (SRC Act). In particular, the course deals with the relevant legislative provisions and accompanying case law. This course is aimed at stakeholders involved in managing workplace injury under the Commonwealth scheme, including: <ul style="list-style-type: none"> ○ case managers ○ supervisors ○ human resource managers ○ approved Workplace Rehabilitation Providers • <i>A Rehabilitation Delegates Guide to Case Management (formerly Case management essentials)</i> (Duration: two days) Overview: The rehabilitation case manager's role under the Safety, Rehabilitation and Compensation Act 1988 (SRC Act) is pivotal to a sustainable return to work outcome. This course provides new case managers with information to support them perform their role within the Commonwealth Jurisdiction, including Comcare's injury management and return to work models as well as return to work procedures and practices. This course is aimed at those with rehabilitation case management responsibilities. • <i>A Rehabilitation Delegates Guide to Complex Cases (formerly Case management: the next steps)</i> (Duration: one day) Overview: This course is designed for case managers who have attended Comcare's Case Management Essentials and are ready to step up to the next level of case management. Participants gain a deeper understanding of the Safety Rehabilitation and Compensation Act 1988 (SRC Act) and complex liability and return to work issues, including strategies and tools they can implement within their organisation to assist in the return to work of injured employees. This course is aimed at those with rehabilitation case management responsibilities that have worked in the role for a period of time. It is recommended that there be a reasonable gap between completing Case Management Essentials and this course. • <i>A Supervisors Role in Early Intervention and Rehabilitation</i> (further information not provided on website)
Comcare's Rehabilitation Case Manager Forums	<ul style="list-style-type: none"> • Comcare's Rehabilitation Case Manager Forums (approximately two held per year) are designed to give case managers the opportunity to hear from speakers with current experience in the workers' compensation industry and network with other case managers. The forums are relevant to case managers with an interest in the continued development of workplace health, safety and rehabilitation.
Comcare National Conference	<ul style="list-style-type: none"> • From 2016, the Comcare National Conference will be held every two years.
Rehabilitation Handbook	<ul style="list-style-type: none"> • <i>Rehabilitation handbook: Understanding rehabilitation and return to work under the Safety, Rehabilitation and Compensation Act 1988</i> (publication download, requests & hard copy ordering are available) Published by

	<p>Comcare © Commonwealth of Australia 2012. This handbook has been developed to help scheme employers provide effective rehabilitation programs for injured employees. It provides guidance on maintaining injured employees at work or achieving an early, safe and durable return to work.</p>
<p>Guidelines for Rehabilitation Authorities</p>	<ul style="list-style-type: none"> • Guidelines for Rehabilitation Authorities 2012 Safety, Rehabilitation and Compensation Act 1988 Section 41. Published by Comcare © Commonwealth of Australia 2012. The Guidelines for Rehabilitation Authorities 2012 are issued to rehabilitation authorities (employers) in relation to their performance and exercise of their functions and powers under Part III – Rehabilitation of the Safety, Rehabilitation and Compensation Act 1988.
<p>Case manager competencies</p>	<ul style="list-style-type: none"> • Case manager competencies provide a useful framework for employers on the skills and experience required by case managers and include: <ul style="list-style-type: none"> ○ arrange and coordinate rehabilitation and return to work strategies ○ help develop and implement the agency rehabilitation system ○ manage effective workplace relationships ○ manage personal work priorities and professional development.
<p>Fact sheet: What can I do? Rehabilitation case manager</p>	<ul style="list-style-type: none"> • This fact sheet provides information for Rehabilitation Case Managers on how to support the recovery of workers whose mental health is at risk, or who are suffering from a psychological injury.

Attachment 1: Final BIRP Education and Training Survey

FINAL BIRP Education and Training Survey

BIRP Education and Training Survey

This survey has been developed by the Sax Institute for the Agency for Clinical Innovation (ACI).

The purpose of this survey is to understand the education and training resources available for BIRP case managers in NSW.

This survey is intended to be completed together with the BIRP case managers in your service. You may consider going through the questions together or you may complete the survey in stages by logging out of the survey at any time to seek information from the case managers and logging in again to complete unanswered questions. Your responses will be saved and you will not need to start the survey again.

Please consider the education and training resources that you, and the BIRP case managers within your service, have recently used (that is, in the last 2 years) or are aware of.

Please try to complete all questions by 31 July 2015.

Please send a copy by email or post of any written resources or any course/workshop/training outlines to the Sax Institute (simone.demorgan@saxinstitute.org.au) Address: PO Box K617 Haymarket NSW 1240.

Firstly, a few questions for the BIRP steering committee members and the nominated private members of the Rehabilitation Network.

FINAL BIRP Education and Training Survey

About you and your service

1. Are you are member of the BIRP Steering Committee in NSW?

Yes

No

2. Are you a private member of the Rehabilitation Network?

Yes

No

3. What is the title of your current position and the name of your service?

4. How many BIRP case managers are in your service (Include yourself if you are a case manager)?

1

2

3

4

5

6

7

8

9

10

11

12

13

14

FINAL BIRP Education and Training Survey

The role of case management

5. What proportion of your work is spent on case management?

Please answer for each BIRP case manager in your service (as available).

	less than 25%	25-49%	half	51-75%	more than 75%
Case manager 1	<input type="radio"/>				
Case manager 2	<input type="radio"/>				
Case manager 3	<input type="radio"/>				
Case manager 4	<input type="radio"/>				
Case manager 5	<input type="radio"/>				
Case manager 6	<input type="radio"/>				
Case manager 7	<input type="radio"/>				
Case manager 8	<input type="radio"/>				
Case manager 9	<input type="radio"/>				
Case manager 10	<input type="radio"/>				
Case manager 11	<input type="radio"/>				
Case manager 12	<input type="radio"/>				
Case manager 13	<input type="radio"/>				
Case manager 14	<input type="radio"/>				

Any other comments?

FINAL BIRP Education and Training Survey

6. Of the case managers who completed the question above, what is your professional background?

	Nursing	Allied health psychosocial (social work, social welfare, psychology)	Allied health rehabilitation (OT, physio, speech, rehab counsellor)	Case manager
Case manager 1	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Case manager 2	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Case manager 3	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Case manager 4	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Case manager 5	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Case manager 6	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Case manager 7	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Case manager 8	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Case manager 9	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Case manager 10	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Case manager 11	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Case manager 12	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Case manager 13	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Case manager 14	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Other (please specify)

FINAL BIRP Education and Training Survey

Gaps in the education and training resources for case managers

7. Do you think you have adequate resources (including written resources and training) to fulfill your role as a case manager?

Please answer for each BIRP case manager in your service (as available).

	adequate	not adequate
Case manager 1	<input type="radio"/>	<input type="radio"/>
Case manager 2	<input type="radio"/>	<input type="radio"/>
Case manager 3	<input type="radio"/>	<input type="radio"/>
Case manager 4	<input type="radio"/>	<input type="radio"/>
Case manager 5	<input type="radio"/>	<input type="radio"/>
Case manager 6	<input type="radio"/>	<input type="radio"/>
Case manager 7	<input type="radio"/>	<input type="radio"/>
Case manager 8	<input type="radio"/>	<input type="radio"/>
Case manager 9	<input type="radio"/>	<input type="radio"/>
Case manager 10	<input type="radio"/>	<input type="radio"/>
Case manager 11	<input type="radio"/>	<input type="radio"/>
Case manager 12	<input type="radio"/>	<input type="radio"/>
Case manager 13	<input type="radio"/>	<input type="radio"/>
Case manager 14	<input type="radio"/>	<input type="radio"/>

Any other comments?

FINAL BIRP Education and Training Survey

Gaps in the education and training resources for case managers

8. Please consider the 10 core elements of the BIRP case management intervention and your own experience as a BIRP case manager or working in the brain injury area.

The 10 core elements are:

1. Assessment

Complete holistic assessments at referral and subsequent key points

2. Goal setting and support planning

Develop client centred, needs based goals using clinical reasoning and in liaison with all relevant stakeholders

3. Referral and liaison

Manage access to and support for non-BIRP services

4. Monitoring and reviewing

Use an interactive process for the purpose of tracking client status during rehabilitation

5. Individual client work

Use clinical knowledge and expertise to develop support structures that maximize participation by building individual capacity in combination with environmental supports

6. Advocacy

Undertake individual and systemic advocacy to achieve equity of access to existing resources

7. Coordination

Manage the involvement of multiple stakeholders to work together as a team

8. Support of family and social networks

Work collaboratively with families and social networks to support clients in community living and social participation

9. Education

Provide needs based education to individuals, families/social networks and service systems

FINAL BIRP Education and Training Survey

10. Community and service development

Investigate and influence policies and practices to ensure that service systems are responsive to individual and family needs.

With these 10 core elements in mind, please list FOUR education and training resources that you think should be developed for BIRP case managers.

Please briefly specify the CONTENT (what the education and training resource should cover) and the TYPE of resource (eg booklets/ pamphlet/ books/ chapters/ information from websites/ training workshops/ courses/ forums/ conferences/ mentorship programs).

RESOURCE
ONE

RESOURCE
TWO

RESOURCE
THREE

RESOURCE
FOUR

FINAL BIRP Education and Training Survey

Written resources as part of orientation program

Thinking now about the written resources that are provided to new BIRP case managers as part of their orientation program eg booklets/ pamphlet/ books/ chapters/ information sheets, information from websites. Include written resources from NSW, other states and internationally as well as those developed within your service.

9. Please indicate if the following types of written resources are provided as part of the ORIENTATION PROGRAM in your service.

For EACH type of written resource that you answered YES please describe briefly the SPECIFIC resource(s) in the comments box below.

	Yes	No
HETI (Health Education and Training Institute) written resources	<input type="radio"/>	<input type="radio"/>
Written resources accessed via www.tbistafftraining.info	<input type="radio"/>	<input type="radio"/>
Written resources from ASSBI (Australian Society for the Study of Brain Impairment)	<input type="radio"/>	<input type="radio"/>
Written resources for working with Aboriginal people (general and/or with ABI/TBI)	<input type="radio"/>	<input type="radio"/>
Written resources developed by your service	<input type="radio"/>	<input type="radio"/>
OTHER written resources (include other booklets/chapters/books/information sheets, other useful websites)	<input type="radio"/>	<input type="radio"/>

Please name the resource(s) or website link and send any resource(s) to the Sax Institute (if available)

FINAL BIRP Education and Training Survey

Training as part of the orientation program

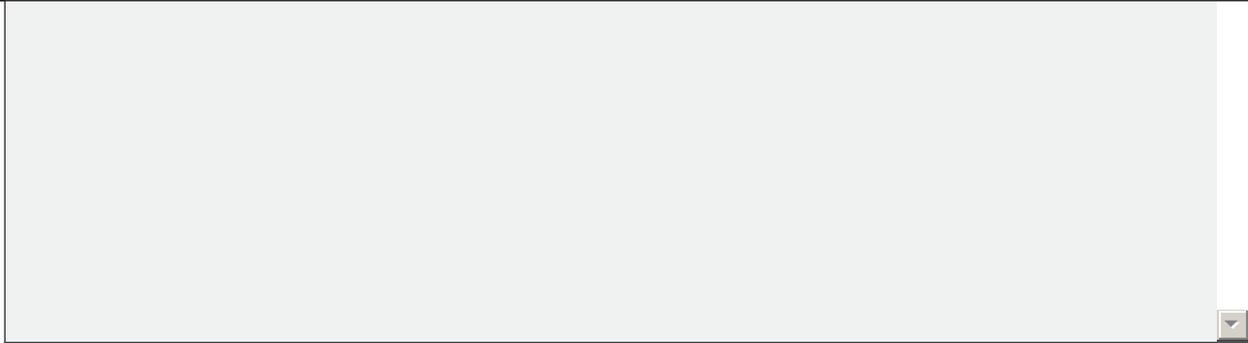
Thinking now about the training available for new BIRP case managers within your service as part of their orientation program ie university and TAFE courses/ short courses/ workshops/ forums/ conferences/ mentorship programs. Include training in NSW, other states and internationally as well as within your service.

10. Please indicate if the following types of training are available as part of the ORIENTATION PROGRAM in your service.

For EACH type of training resource that you answered YES please describe briefly the SPECIFIC training (including the name of the training and who the training was for) in the comments box below.

	Yes	No
University and TAFE courses	<input type="radio"/>	<input type="radio"/>
Goal training	<input type="radio"/>	<input type="radio"/>
Motivational Interviewing	<input type="radio"/>	<input type="radio"/>
Mentorship programs	<input type="radio"/>	<input type="radio"/>
Training from HETI (Health Education and Training Institute)	<input type="radio"/>	<input type="radio"/>
Training accessed via www.tbistafftraining.info	<input type="radio"/>	<input type="radio"/>
Training from ASSBI (Australian Society for the Study of Brain Impairment)	<input type="radio"/>	<input type="radio"/>
Training for working with Aboriginal people (general and/or with ABI/TBI)	<input type="radio"/>	<input type="radio"/>
Training developed by your service	<input type="radio"/>	<input type="radio"/>
NSW BIRP forum	<input type="radio"/>	<input type="radio"/>
Conferences (NSW, other states, internationally)	<input type="radio"/>	<input type="radio"/>
OTHER training (include other short courses, workshops and forums)	<input type="radio"/>	<input type="radio"/>

Please name the training and write who it is for and send outlines etc to the Sax Institute (if available)



FINAL BIRP Education and Training Survey

Written resources for ongoing professional development

Thinking now about the written resources that you and other BIRP case managers within your service have recently used or are aware of for ongoing professional development eg booklets/ pamphlet/ books/ chapters/ information from websites. Include written resources from NSW, other states and internationally as well as those developed within your service.

11. Please indicate if you have recently used or are aware of the following types of written resources in your service OTHER THAN in the orientation program.

For EACH type of written resource that you answered YES please describe briefly the SPECIFIC resource(s) in the comments box below.

	Yes	No
HETI (Health Education and Training Institute) written resources	<input type="radio"/>	<input type="radio"/>
Written resources accessed via www.tbistafftraining.info	<input type="radio"/>	<input type="radio"/>
Written resources from ASSBI (Australian Society for the Study of Brain Impairment)	<input type="radio"/>	<input type="radio"/>
Written resources for working with Aboriginal people (general and/or with ABI/TBI)	<input type="radio"/>	<input type="radio"/>
Written resources developed by your service	<input type="radio"/>	<input type="radio"/>
OTHER written resources (include other booklets/chapters/books/information sheets, other useful websites)	<input type="radio"/>	<input type="radio"/>

Please name the resource(s) or website link and send any resource(s) to the Sax Institute (if available)

FINAL BIRP Education and Training Survey

Training

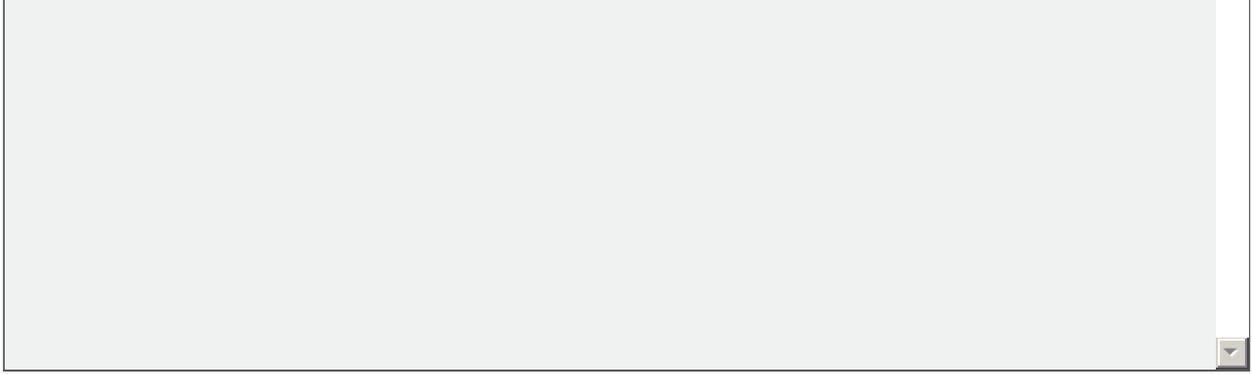
Thinking now about the training that you and other BIRP case managers within your service have recently participated in or are aware of as ongoing professional development ie university and TAFE courses/short courses/workshops/forums/conferences/mentorship programs. Include training in NSW, other states and internationally as well as within your service.

12. Please indicate if you have recently participated in or are aware of the following types of training OTHER THAN in the orientation program.

For EACH type of training resource that you answered YES please describe briefly the SPECIFIC training (including the name of the training and who the training was for) in the comments box below.

	Yes	No
University and TAFE courses	<input type="radio"/>	<input type="radio"/>
Goal training	<input type="radio"/>	<input type="radio"/>
Motivational Interviewing	<input type="radio"/>	<input type="radio"/>
Mentorship programs	<input type="radio"/>	<input type="radio"/>
Training from HETI (Health Education and Training Institute)	<input type="radio"/>	<input type="radio"/>
Training accessed via www.tbistafftraining.info	<input type="radio"/>	<input type="radio"/>
Training from ASSBI (Australian Society for the Study of Brain Impairment)	<input type="radio"/>	<input type="radio"/>
Training for working with Aboriginal people (general and/or with ABI/TBI)	<input type="radio"/>	<input type="radio"/>
Training developed by your service	<input type="radio"/>	<input type="radio"/>
NSW BIRP forum	<input type="radio"/>	<input type="radio"/>
Conferences (NSW, other states, internationally)	<input type="radio"/>	<input type="radio"/>
OTHER training (include other short courses, workshops and forums)	<input type="radio"/>	<input type="radio"/>

Please name the training and write who it is for and send outlines etc to the Sax Institute (if available)

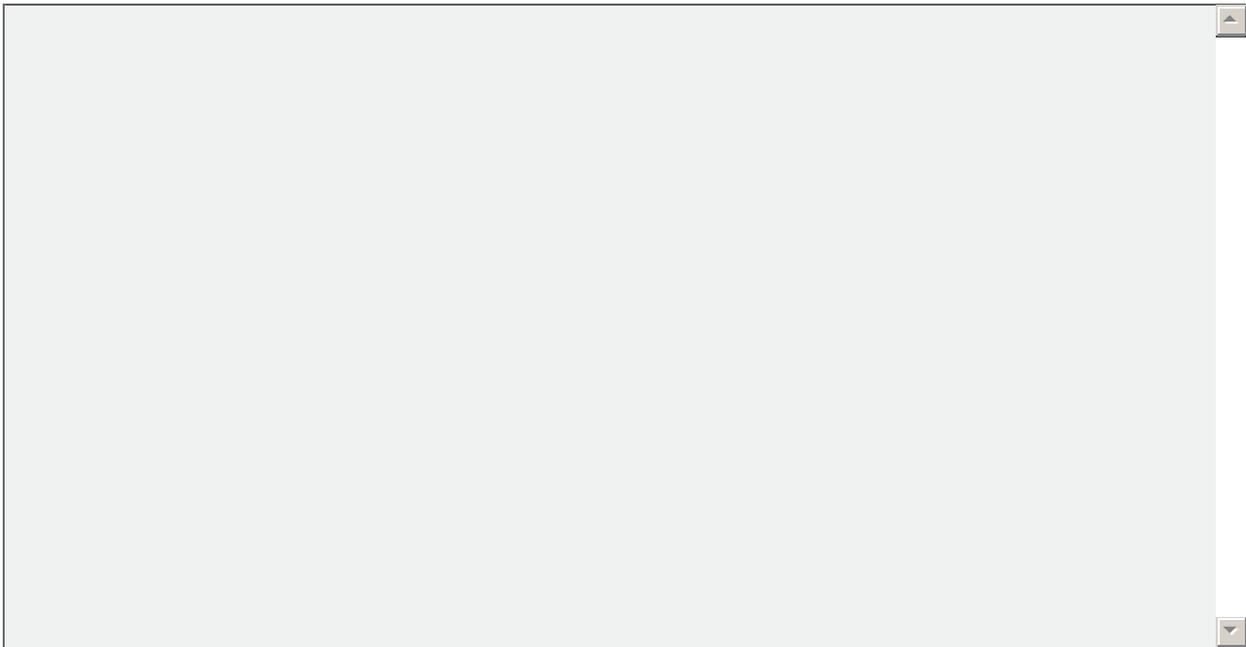


FINAL BIRP Education and Training Survey

Further comments

13. Lastly, Do you know of any relevant education and training resources in development in NSW, other states, internationally?

Do you have any further comments about the education and training resources available for BIRP case managers or perceived gaps in these resources?



FINAL BIRP Education and Training Survey

Thank you

Thank you for completing this survey.

If possible, please provide by email or post any written resources, course/workshops/training outlines or manuals or links to useful websites. This information will be very useful in evaluating the education and training resources and opportunities for BIRP case managers and for understanding any gaps in the resources and opportunities available to them.

If you have any questions please do not hesitate to email Dr Simone De Morgan.

Dr Simone De Morgan
Sax Institute
PO Box K617 Haymarket NSW 1240
simone.demorgan@saxinstitute.org.au