

**CARF
Survey Report
for
Rehab Without
Walls**

Organisation

Rehab Without Walls (RWW)
27 Presley Way, Crownhill
Milton Keynes
Buckinghamshire MK8 0ES
ENGLAND

Organisational Leadership

Cathy Johnson, B.Sc., Dip.A.S.S., CQS
Brain Injury Case Manager Director

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Director & Consultant Neuropsychologist

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Director - Practice Development

Survey Dates

August 27-28, 2015

Survey Team

Dani C. Kinch, Administrative Surveyor

Cindy J. Barrus, MM, PT, CBIST, Programme Surveyor

Programmes/Services Surveyed

Case Management (Adults)

Case Management: Brain Injury Specialty Programme (Adults)

Case Management: Brain Injury Specialty Programme (Children and Adolescents)

Previous Survey

August 23-24, 2012

Three-Year Accreditation

Survey Outcome

Three-Year Accreditation
Expiration: September 2018



Three-Year Accreditation

SURVEY SUMMARY

Rehab Without Walls (RWW) has strengths in many areas.

- Members of the RWW leadership are known as leaders in the case management (CM) field in the United Kingdom (UK) and services, programme progression, and development of RWW has benefited both RWW's CM programmes and the CM industry in the UK overall. This is evidenced through the development of the competencies for case managers and standards for case management practice with the British Association of Brain Injury Case Managers (BABICM) organisation and the integration of these competencies in the RWW professional development planning with all case managers.
- The leadership meets frequently to discuss operations, and swift resolutions of any areas of concern are identified. Operational leadership also meets monthly to review operations. This results in a comprehensive overview of organisational performance allowing the leadership to be informed and have the ability to respond to any identified risk areas quickly.
- RWW has an excellent support structure for its community case managers from a learning perspective with bi-monthly day-long training sessions that encompass required training, case file reviews, and peer-to-peer contact and monthly supervisory reviews with senior case managers.
- The rehabilitation programmes have developed a variety of formal and informal communication mechanisms for all providers involved in providing care to be aware of the plan of care for the client and to respond quickly when changes in the plan are indicated.
- RWW demonstrates strong financial performance with solid financial reporting processes. The addition of Excel[®] document timesheets that integrate into the billing system is innovative and has improved billing recognition time and increased responsiveness to any risks identified due to unusual billings.
- The organisation has integrated a mobile tablet reporting process for the risk assessment tool, daily notations, and billing, which has been well received and rolled out entirely across the network within the past year.
- The organisation has a detailed orientation (induction) and mentoring programme that provides a specific process for adding responsibilities to new case managers over time, with close supervision provided by senior case managers and organisational leadership, which is adjusted based on the new employee's needs. Case managers continue to have graded supervision over time, along with clear professional development plans so that all case managers grow in knowledge and skills specific to their roles, drawing upon the BABICM Competency Framework. External stakeholders note that RWW team members are consistently knowledgeable, are competent, and demonstrate excellent case management skills, along with compassion and respect for the clients.
- The organisation is identified by stakeholders as exceptional in terms of the quality of services provided and excellence in communication. The CM programmes are respected for the compassionate and respectful care provided by the CM team.
- The organisation is clearly committed to promoting self-responsibility and autonomy in the clients, which is noted by the clients as a sign of respect.

- Case managers demonstrate an extensive knowledge of resources available to support client needs. Because the team members come from various clinical backgrounds, they are able to draw on each other's knowledge and experience when needed for complex cases.
- The case manager assessment is detailed, resulting in a comprehensive written report that includes a clinical summary, client goals, and financial information. This report is provided to the client and to the payer.
- The programme service guide provides an excellent overview of services available through RWW, including financial information and the complaint process, providing a transparent and clear start to care.
- RWW has an excellent reputation in the UK and is known and respected for its case managers' knowledge of brain injury; resources available; and compassionate, respectful care.
- The programmes promote wellness and personal growth in the clients, with client plans that include exercise, access to community resources such as the gym or exercise classes, and providing educational resources regarding chronic conditions that can be positively impacted by lifestyle choices.
- The clients appreciate that they have easy access to their case manager when needed. This access is especially appreciated at the start of care, when the clients and their families are often feeling the most vulnerable and confused regarding how to navigate to get access to resources.
- Members of the programme leadership contribute to the field of brain injury and CM through involvement in local and national organisations, speaking at conferences, and commitment to growing their own team member's knowledge and skills.
- The programmes are recognised for their knowledge of the litigation process, and demonstrate skills in navigating complex situations for the best possible outcomes for the clients.

In the following area RWW demonstrates exemplary conformance to the standards.

- The organisation has worked with the BABICM Competency Framework in establishing and reviewing competencies for case managers. This competency model is tiered by experience and is comprehensive. RWW has fully integrated this competency model into its competency review and training processes. This integration is effective, simple to implement and review, and focuses on personnel development in seven core areas required for effective practice, which are communication, strategy, coordination and management, monitoring, duty of care, professionalism, and personal attributes. These areas are broken down into specific components with three identified levels of competence, along with positive and negative attributes for each component, which assists with objective review processes and assists with professional development planning. This process is highly effective in establishing clear expectations for job function, competency, and expectations, supporting the organisation's goal for highly competent personnel and case managers with advanced standing with BABICM.

RWW should seek improvement in the areas identified by the recommendations in the report. Consultation given does not indicate non-conformance to standards but is offered as a suggestion for further quality improvement.

On balance, RWW has assembled a dedicated group of professionals who provide much-needed services to the communities in the UK that it serves. The organisation continues to respond to the rehabilitation needs of these communities and the stakeholders it serves. Case managers demonstrate an extensive knowledge of resources available to support client needs. The programmes promote

wellness and personal growth in the clients. The organisation is clearly committed to promoting self-responsibility and autonomy in the clients. The organisation has areas for improvement, including implementing a cultural competency and diversity plan; infection prevention and control procedures; an accessibility plan; conducting unannounced testing of all emergency procedures; defining performance management systems and analysing outcomes; analysing denials, service referrals determined to be ineligible, and interrupted services; personnel competencies for working with children/adolescents; gathering and analysing satisfaction data for the brain injury specialty programme; working with community leaders to develop emergency procedures for clients in the brain injury specialty programme; gathering information and analysing it for clients in the CM programme; and performing at least an annual analysis of the records of the clients served. RWW has demonstrated a desire and ability to improve its programme and service delivery model and appears to have the ability to address the areas for improvement identified in this report.

Rehab Without Walls has earned a Three-Year Accreditation. The staff and leadership of the organisation are congratulated for this accomplishment. The leadership and clinical personnel are urged to address the areas for improvement identified in this report and encouraged to continue to make use of the CARF standards to provide services to the community that are of optimum value.