



NATIONAL BPD TRAINING STRATEGY
Australian BPD Foundation

Final Report on

Stage Two of the National BPD Training and
Professional Development Strategy:

*“Upskilling and Engaging Clinicians Working with
People with Borderline Personality Disorder
and their Families”*

Activity 3: Review of e-Learning Modules

Prepared for the National Mental Health Commission by:

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Date delivered:

1 June 2021

Introduction

Stage Two of the National BPD Training and Professional Development Strategy aims to improve clinicians and service providers' capacity to recognise, respond to and treat people living with BPD and to be able to include/work with and better support their families and carers.

Three identifiable activities for consideration toward achieving this overarching aim were identified.

- Activity 1: Development of e-learning modules
- Activity 2: Identify BPD Champions interested and appropriately skilled to undertake Stage 3, face to face intensive workshops and Train the Trainer
- Activity 3: Review the content of each e-learning module to ensure that they represent current Australian and international best practice over years two and three of this project.

This report summarises active feedback, peer review, and expert review of e-learning materials for National BPD Training “Effective psychological treatment for borderline personality disorder: E-learning training program for mental health workers and service providers” as at 30 April 2021 and represents the final report for Stage 2 of the National BPD Training and Professional Development Strategy.

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Executive Summary

With a view to realizing the aims of Stage Two of the National BPD Training and Professional Development Strategy the Australian BPD Foundation commissioned Project Air Strategy¹ to provide expert clinical knowledge, resources and input during the life of the project; to develop the e-learning modules in consultation with other experts and relevant organisations and review the content of the e-learning modules.

As part of this project, it was agreed that Project Air would:

- provide expert clinical knowledge, resources and input during the life of the project;
- provide the technological expertise in the development of the web-based e-learning tool;
- develop the e-learning modules in consultation with other experts and relevant organisations;
- review the content of each e-learning over years two and three to ensure they are fit for purpose and represent current international and Australian practice; and
- extend the virtual library resource to support the e-learning modules which will include synthesizing and reviewing for currency local and international content for inclusion in the virtual library resource.

This report provides feedback and peer review on the process of testing and improving e-learning materials, and expert review of content of modules and improving components. A panel of 89 experts peer reviewed the content of each of the modules. Feedback from the expert panel is presented separately in this report. Their responses were consistently positive, noting they were pleased with the quality of the training.

As of 30 April 2021 approximately 1,121 health professionals had completed the *“Effective psychological treatment for borderline personality disorder: An e-learning training program for mental health workers and service providers”*. Training evaluations from those participants were analysed and are summarised in this report.

This is the final report from the Australian BPD Foundation under Stage 2 of the National BPD Training and Professional Development Strategy. It represents the completion of obligations under the Stage Two of the Strategy.

However, given the demand for the eLearning training program and the value to participants outlined in the report, we present some options for consideration in continuing to offer the program for another three years.

¹ Project Air Strategy offers comprehensive training for health professionals, services and organisations who work with people with personality disorders. Project Air Strategy has demonstrated expertise both in knowledge of BPD, training and research and has the necessary technological expertise and equipment to develop the web-based e-learning modules.

Development of the e-learning program

With a view to realizing the aims of Stage Two of the National BPD Training and Professional Development Strategy Project Air was commissioned to provide expert clinical knowledge, resources and input during the life of the project, develop the e-learning modules in consultation with other experts and relevant organisations, and review the content of the e-learning modules.

The project commenced in early 2018 and by November the first draft of the e-learning program was completed and launched at the 12th International Conference on the Treatment of Personality Disorders by Rita Brown, President of the Australian BPD Foundation.

Project Air conducted extensive internal testing with a team of 8 researchers who worked together to ensure all the components worked well and to remove any typos or inconsistencies. They also engaged a review from three people with lived experience (consumers and carers) to comment on language, style and approach.

In early 2019 they had 8 external clinicians go through and complete the entire 5 modules and provide them with extensive peer review. As a result, no further changes were identified as the external consultants were highly satisfied. That completed Stage 3 and the e-learning program was deemed fit for distribution and use.

The e-learning program is [publicly available here](#).

Consultation Evaluation

Number of clinical Staff trained

Approximately 1121 health professionals completed the “Effective psychological treatment for borderline personality disorder: An e-learning training program for mental health workers and service providers” as of 30 April 2021. Training evaluations were analysed and the following data is based on the responses.

Demographic characteristics and professions

Participants were predominantly female (83%), with an average age of 38.48 years (SD = 11.98). Staff professions included psychologists, psychiatrists, nurses, social workers and occupational therapists. Others included mental health support workers, aboriginal mental health workers, peer support workers, AOD workers, case workers, disability support workers, teachers, doctors, counsellors, and students studying in various social sciences.

Psychologists reported to work in team leadership, clinical, provisional, counsellor and school roles. Psychiatrists reported to work in leadership, trainee, consultant, and in- patient registrar roles. Nurses reported to work in student, RN, case manager, team leadership and CNC roles. Social workers reported to work in service manager, teacher aid, counselling, recovery support, student and leadership roles.

Occupational therapists reported to work in leadership, clinical, case managing, student and community engagement roles.

The majority of the health professionals’ employers were from community health, education, forensic, in- patient, mental health and outpatient fields. Other employers included business owners, private practice owners, NGO’s, universities, and AOD services.

Table 1. Participating staff professions from the e-learning training (n = 1110, excluding 11 due to missing data)

	N	%
Psychologist	238	21%
Psychiatrist	12	1%
Nurse	251	23%
Social Worker	239	21%
Occupational Therapist	31	3%
Other	339	31%
Total	1110	100%

The project has evaluated staff changes in knowledge, skills and confidence in working with people with complex mental health issues as a result of completing the training. Perceived helpfulness of the training and satisfaction with the training was also evaluated and is reported as follows.

Expertise of staff consulted

Participants were asked to rate their self-reported level of expertise, ranging from 'minimal' to 'expert'. Overall self-reported expertise is reported in Figure 1. The majority of participants reported developing- sound levels of expertise.

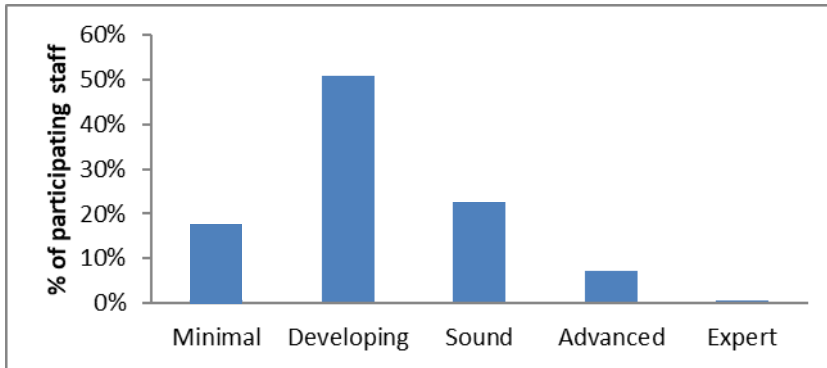


Figure 1. Self-rated expertise of those who completed the e-learning modules ($n = 1120$, excluding one due to missing data)

Perceptions of the e-learning training

Participants were asked to rate their satisfaction with the e-learning training and how helpful they felt it was for improving outcomes for people with borderline personality disorder. The majority of staff (91%) reported being either satisfied or very satisfied with the training, and 92% reported that they felt the training would be helpful or very helpful in improving outcomes for people with borderline personality disorder (see Figures 2 and 3). Staff were also asked whether they would recommend the e-learning training to a colleague – the majority of staff (98%) responded yes to this item.

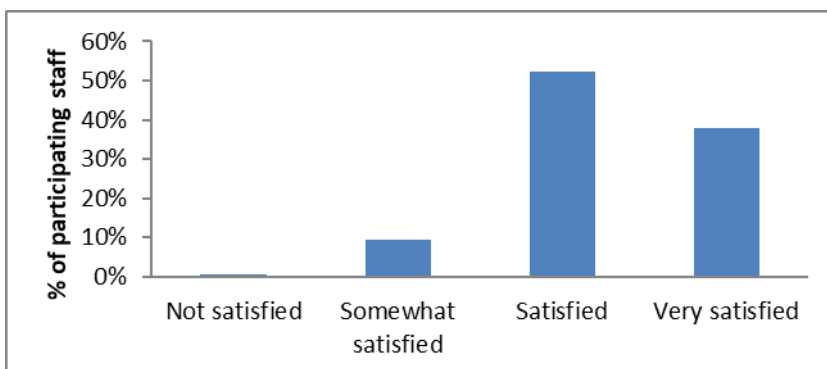


Figure 2. How satisfied were you with the e-learning training? ($n = 1119$, excluding two due to missing data)

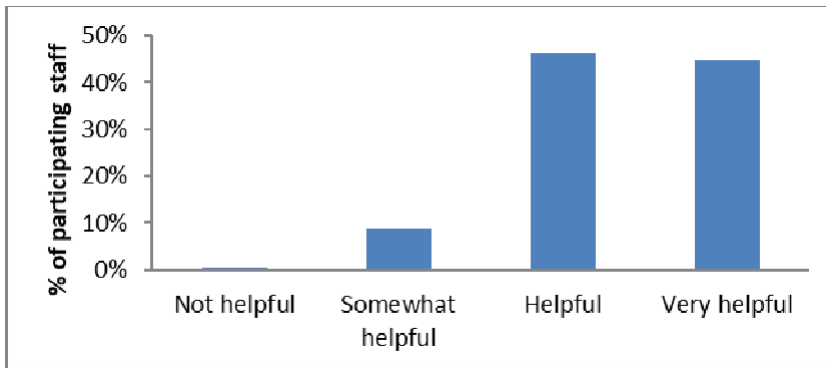


Figure 3. How helpful did you find the e-learning training for improving outcomes of people with complex mental health issues? (n = 1119, excluding two due to missing data)

Clinical skills, knowledge and attitudes towards people with personality disorders

Participants were asked to rate how useful they found the e-learning training for improving their willingness, optimism, enthusiasm and confidence in working with people with complex mental health issues. They were also asked whether they found the training useful for improving their knowledge and clinical skills with regard to working with people with complex mental health issues.

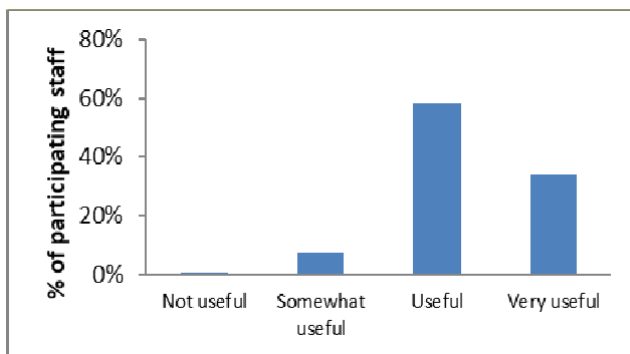


Figure 4. How useful was the training for improving **willingness** to work with people who have complex mental health issues? (n = 1115, excluding six due to missing data)

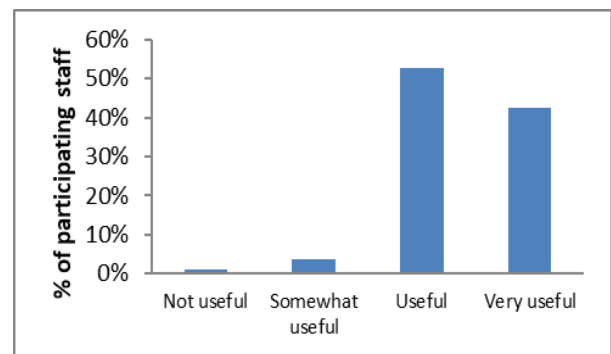


Figure 5. How useful was the training for improving **optimism** with regards to working with people who have complex mental health issues? (n = 1117, excluding four due to missing data)

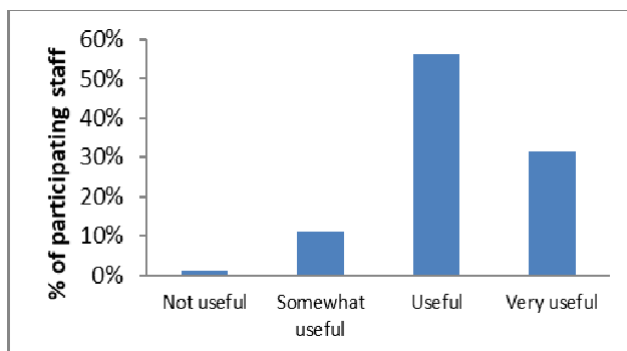


Figure 6. How useful was the training for improving your **enthusiasm** with regards to working with people who have complex mental health issues? (n = 1116, excluding five due to missing data)

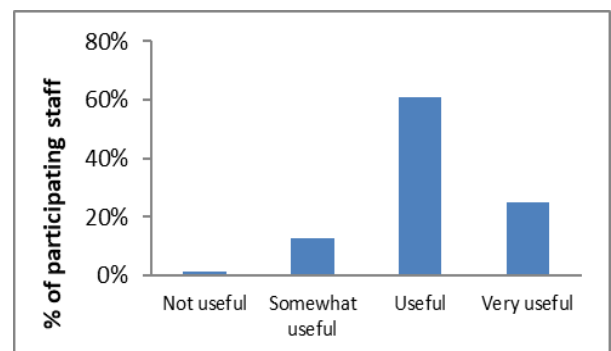


Figure 7. How useful was the training for improving **confidence** with regards to working with people who have complex mental health issues? (n = 1115, excluding six due to missing data)

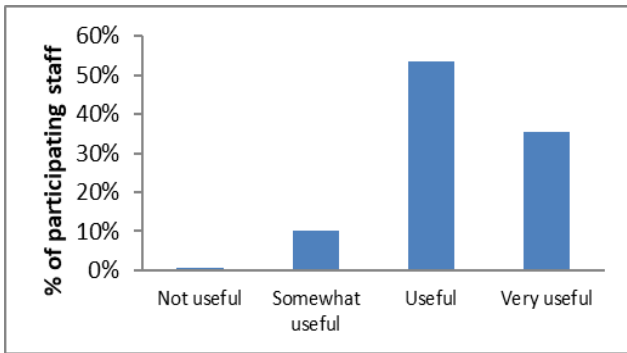


Figure 8. How useful was the training for improving your **knowledge** with regards to working with people who have complex mental health issues? (n = 1116, excluding five due to missing data)

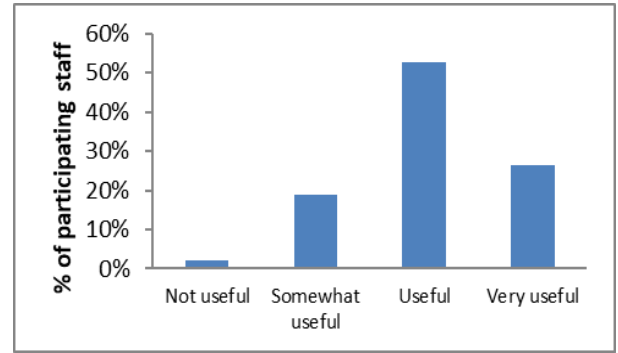


Figure 9. How useful was the training for **improving** your clinical skills with regard to working with people who have complex mental health issues? (n= 1115, excluding six due to missing data)

Participants completed five modules during the e- learning training program. Participants were asked to how helpful they felt each module was for improving their knowledge and skills in working with people with complex mental health issues.

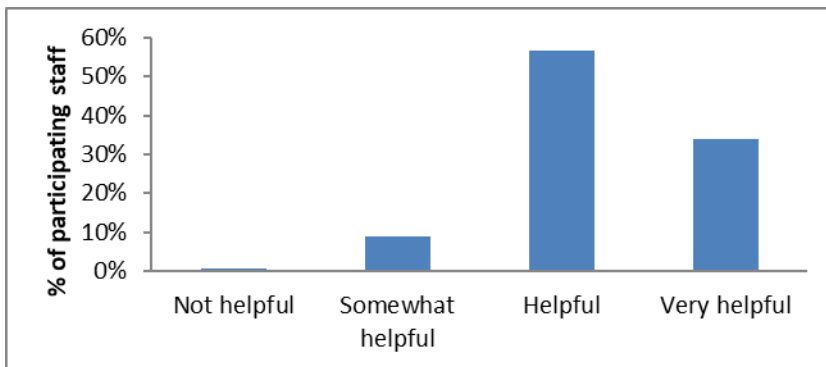


Figure 10. Participant overall rating of Module 1: What is effective care for BPD? (n = 1112, excluding nine due to missing data)

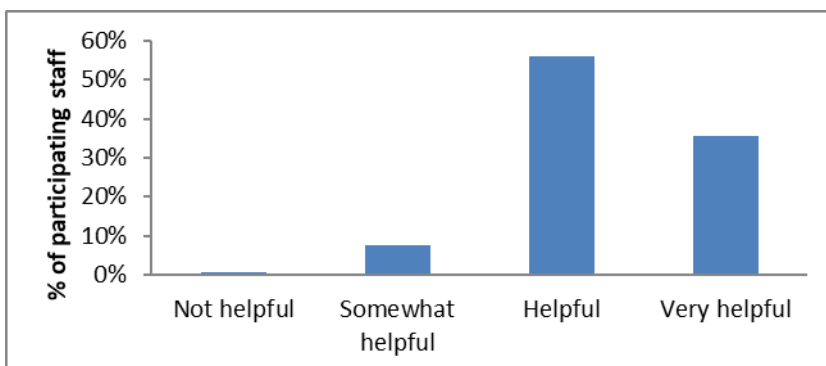


Figure 11. Participant overall rating of Module 2: How to effectively engage people with BPD in treatment. (n = 1115, excluding six due to missing data)

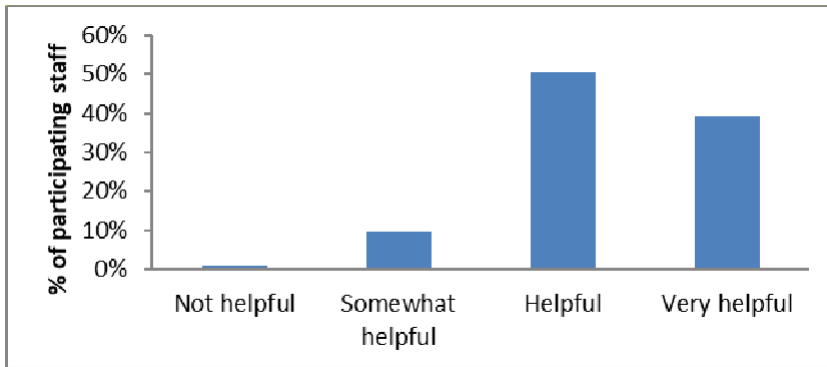


Figure 12. Participant overall rating of Module 3: How to reduce crises and increase safety to promote recovery in people with BPD. (n = 1117, excluding four due to missing data)

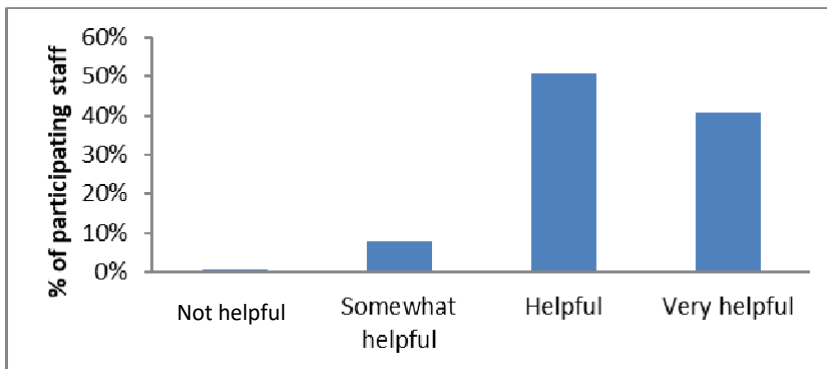


Figure 13. Participant overall rating of Module 4: Working actively with people with BPD and connecting with carers, partners and family. (n = 1117, excluding four due to missing data)

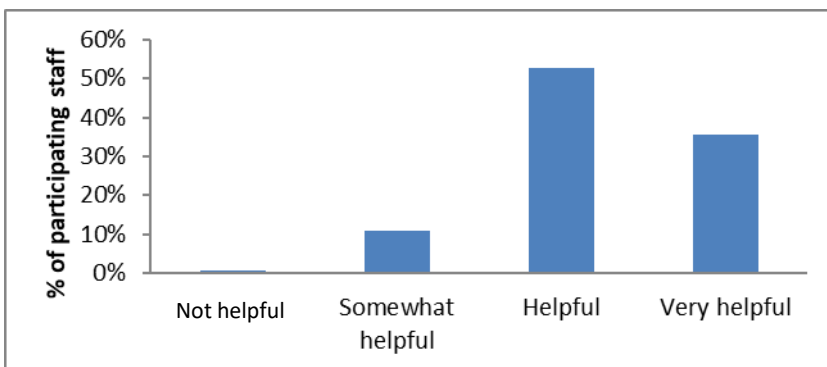


Figure 14. Participant overall rating of Module 5: Successful BPD treatment: A survival guide for health care workers. (n = 1116, excluding five due to missing data)

What did participants like about the e-learning training?

Participants were asked to comment on what aspects of the e-learning training they found most useful. Positive feedback about information on the research on personality disorder in people, resources, strategies for clinical practice and the online delivery format were provided by clinicians. Comments on the training delivery were also consistently reported. Examples are provided below.

Table 2. What aspects of the e-learning training do you believe would be most useful in working with borderline personality disorder? (n = 981, excluding 140 due to missing data)

<p>Research and Background</p>	<p><i>'Understanding BPD and how a patient relates to the world'</i></p> <p><i>'Stepped care approaches, DBT and Supervision for Therapists'</i></p> <p><i>'Understanding the development of BPD and its diagnosis'</i></p> <p><i>'Assessment/diagnostic information, evidence-based treatment information, information about the different types of interventions available, removing stigma, debunking associated myths with Borderline'</i></p> <p><i>'Having a clear knowledge and understanding of what BPD is knowing some evidence based strategies on working with them'</i></p> <p><i>'Awareness and understanding of the diagnosis and specific symptoms and treatment outcomes! Before I did this course, I thought there was no hope for clients.'</i></p>
<p>Resources</p>	<p><i>'The provided resources and expert guidance.'</i></p> <p><i>'Working with families, and carers. and the fact sheets available were fantastic.'</i></p> <p><i>'The templates for care plans, example sentences/ intervention strategies'</i></p> <p><i>'Resources- particularly the user friendly information and workbooks accessed by links. Videos of people with lived experience. General approach to dealing in person with a BPD sufferer without escalating or discouraging.'</i></p> <p><i>'Providing hyperlinks to resources especially the plan/goal templates'</i></p>
<p>Online Training delivery</p>	<p>Content</p> <p><i>'Case studies, interviews and the models provided.'</i></p> <p><i>'Module 3 and 4 as I am a community worker and provide face-to face and phone support.'</i></p> <p><i>'Engaging with the client- module 2 & 3'</i></p> <p><i>'All the modules were appropriate and useful in my work setting'</i></p> <p><i>'Module 4: promoting positive and effective responses in carers'</i></p> <p><i>'The mix of consumer and clinician views, the case studies, quizzes to check knowledge and video vignettes'</i></p>

<p>Online Training delivery</p>	<p>Videos</p> <p><i>'The carer dances video was good as it showed good and bad examples of interacting with someone with BPD. The good example could be adapted to most situations and help interaction between client and carer as well as client and provider.'</i></p> <p><i>'The clips were very useful, particularly the ones from individuals with lived experience.'</i></p> <p><i>'Videos that are provided in the training helped facilitate my understanding.'</i></p> <p><i>'The video where it gave examples of the different types of parent styles e.g. the too kind parent'</i></p> <p><i>'I enjoyed the clip of Peter Fonagy discussing MBT for BPD'</i></p> <p>Other</p> <p><i>'It was very comprehensive and gave practical, specific examples.'</i></p> <p><i>'Clear, concise and easy to understand information'</i></p> <p><i>'The video and the questions to test my knowledge on it'</i></p> <p><i>'Knowledge, identification of resources and the fact that the training is online so can be scheduled around other work.'</i></p> <p><i>'Hearing from those who have recovered from BPD. What worked for them and what was unhelpful for them.'</i></p>
<p>Clinical skills and practice</p>	<p>Treatment</p> <p><i>'All of it but I found knowing about the 5 ingredients and structured therapy to be most helpful'</i></p> <p><i>'The elements regarding to effective responses, planning and treatment'</i></p> <p><i>'Effective strategies and concrete plans and goals focusing on the here and now'</i></p> <p><i>'Understanding the condition and how to best support people to remain in the moment and connect their feelings to events and actions.'</i></p> <p><i>'I found exploring the treatment options for BPD, and the components that encompass effective practice to be most valuable.'</i></p> <p><i>'Clear guidelines around working with BPD.'</i></p>

	<p>Countertransference</p> <p><i>'Recognizing and responding appropriately to transference and countertransference'</i></p> <p><i>'Learning how to control counter-transference on our behalf as a therapist and respond appropriately to it so that it does not impact on the treatment of the client.'</i></p> <p><i>'All aspects especially around countertransference and effective ways to manage it'</i></p> <p><i>'An understanding of countertransference, as this is something which can often go unnoticed yet have profound effects.'</i></p> <p><i>'I believe that acknowledging countertransference as a possible occurrence is very important as clinicians often feel ashamed and try to hide it or are unaware which can make it worse.'</i></p> <p><i>'Addressing countertransference in a team care situation'</i></p> <p>Stigma</p> <p><i>'Breaking down stigma and providing hope around effective treatment strategies to help people with BPD.'</i></p> <p><i>'Understanding the facts, how to reduce stigma and being aware of countertransference'</i></p> <p><i>'Reducing stigma and misinformation that can exist in mental health services'</i></p> <p>Other</p> <p><i>'The importance of encouraging agency and curiosity, this appears to be a sticking point for many of the people I work with'</i></p> <p><i>'Working with carers, partners and anyone involved with the person with BPD. Also remaining in the here and now.'</i></p> <p><i>'The 4 way dance that carers perform was helpful in seeing how a person's reaction to a BPD person can affect the responses and feelings a BPD person has. I also found the information regarding how to engage a BPD client helpful.'</i></p> <p><i>'Mentalisation and putting yourself in the other persons shoes, both as the therapist to help reflect their experience and for client to work on developing.'</i></p> <p><i>'How to manage expectations of the therapist and the client when working with BPD. It think it provided education on the broad aspects that are important to consider.'</i></p> <p><i>'Managing risk and learning how to be responsive'</i></p>
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General	<p><i>'All of it! Very informative and interesting.'</i></p> <p><i>'All aspects of the training.'</i></p> <p><i>'All components. I found the videos from both clinicians and clients with BPD very helpful.'</i></p> <p><i>'All of it, it gave a good general overview of what to do and look for.'</i></p>
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What suggestions did participants provide on how to improve training?

Following training, participants were asked to provide suggestions on how the training could be improved. Suggestions to include additional tools and strategies regarding clinical practice, resources and online training delivery were provided by clinicians. Useful suggestions regarding the content of the workshop were also provided. Examples are provided in the table below.

Table 3. . What are some of the things you would have liked to see in the e-learning training or you believe would improve the e-learning training? (n = 916, excluding 205 due to missing data)

Clinical skills and practice	Treatment
	<p><i>'Perhaps more in-depth training regarding therapy/ treatment and looking at the current evidence-based models in more depth (DBT/schema/psychodynamic)'</i></p> <p><i>'Training in evidence- based therapies for the treatment of personality disorders.'</i></p> <p><i>'More specific advice for treatment providers and families about how to deal with self-harming behaviour most effectively'</i></p> <p><i>'Interventions or skills that are particularly useful for managing crisis and self- harming behaviour'</i></p> <p><i>'More information on strategies/interventions working with young people and families.'</i></p> <p>Client Therapist Interaction</p> <p><i>'Maybe more on how to manage a BPD client if there are strong traits of therapeutic disengagement or attempt to manipulate etc.'</i></p> <p><i>'Techniques and phrases to say to people when they are challenging you or do not want to take responsibility.'</i></p> <p><i>'Additional videos on how clinicians can effectively remain calm and consistent when a person is experiencing significant emotional distress, while remaining compassionate, active and responsive to the person.'</i></p> <p><i>'More discussion on coping mechanisms for clients with BPD and effective communication techniques with BPD clients.'</i></p> <p>Other</p> <p><i>'More intensive examples of what to employ during therapy sessions''Specific strategies for distress tolerance (more in depth)'</i></p> <p><i>'More strategies and techniques for helping with emotion regulation.'</i></p> <p><i>'More information about how to set up a management plan with the client.'</i></p> <p><i>'More interactive activities.'</i></p> <p><i>'More examples of direct clinician interventions and strategies.'</i></p>

<p>Content</p>	<p>Videos</p> <p><i>'More lived experience videos'</i></p> <p><i>'More analytic videos of what to do, and what not to do to really demonstrate the impact a bad approach can have - such as was seen in the 'carer dances' section.'</i></p> <p><i>'Video of interview skills in a variety of settings (initial outpatient assessment, crisis contact etc).'</i></p> <p><i>'More videos from people with BPD who have recovered.'</i></p> <p><i>'More videos, more interactive features. It became tedious just reading slides.'</i></p> <p>Multiple Choice Quizzes</p> <p><i>'Maybe add more MCQs at the end of modules'</i></p> <p><i>'More multiple questions'</i></p> <p><i>'Probably to not bother with the written component and to provide more multiple choice.'</i></p> <p><i>'More multiple-choice questions rather than short answer'</i></p> <p>Role Play</p> <p><i>'More role plays or demonstrations of effectively responding to people with BPD'</i></p> <p><i>'Role play of Mentalisation techniques'</i></p> <p><i>'Role play between client- clinician and some role play amongst clinicians in supervision.'</i></p> <p><i>'Where possible, a role play of how to manage in the room distress, countertransference etc.'</i></p> <p>Case Studies</p> <p><i>'More in- depth case examples with associated in- depth responses that weren't verbatim from the previous slides.'</i></p> <p><i>'More scenario or case-based examples such as with Sarah.'</i></p> <p><i>'I think more client cases could be used to describe features of BPD and treatment at various stages so that treatment providers can learn from real clients and apply the theoretical knowledge during case conceptualisations and while treating people with BPD.'</i></p> <p>Medication</p> <p><i>'More discussions on pharmacotherapy'</i></p> <p><i>'Management of BPD with medications'</i></p> <p><i>'Information about medications prescribed for the disorder'</i></p>
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	<p><i>'About pharmacology and how it can be used'</i></p> <p>Other</p> <p><i>'Perhaps an initial assessment session (mock)'</i></p> <p><i>'Possibly clinicians talking about early experiences and their reactions with first managing people with BPD.'</i></p> <p><i>'Cross-cultural practice with clients with BPD'</i></p> <p><i>'It was well rounded, perhaps something on mindfulness and brain changes (Plasticity)'</i></p> <p><i>'A more thorough description of what exactly BPD is, and its presentation'</i></p>
Resources	<p><i>'A copy of the modules/ power point would be great to have as a resource for students.'</i></p> <p><i>'Some more practical resources or information on where to find these'</i></p> <p><i>'Be able to save a copy of the questions and answers where we had to type in'</i></p> <p><i>'Resource list for clients'</i></p> <p><i>'More printout information leaflets for carers and crisis stress management pages'</i></p> <p><i>'A printable list of e-resources with hyperlinks for future reference. Recommended further training for those wanting more advanced clinical skills and or credentialing'</i></p>
Online training delivery	<p>Technical Issues</p> <p><i>'All good. I found it hard at times to hear the sound in the video clips.'</i></p> <p><i>'videos which actually download'</i></p> <p><i>'The videos need to have subtitles, I viewed this on night shift and could not really hear audio as had to keep volume low in shared office'</i></p> <p><i>'During the video's it would be great if they were captioned in English.'</i></p> <p><i>'I had a lot of technical issues with my course and would have liked more information about completing the course'</i></p> <p><i>'Download of videos was slow on computer so had to skip many of these.'</i></p> <p><i>'The videos often didn't work or would cut out. I tried in different locations with different internet services but no joy.'</i></p>

<p>Online training delivery</p>	<p>Other</p> <p><i>'I felt some of the video tutorials were a little lacking. The one on Mentalisation, in particular, was very wordy but not very practical or clear.'</i></p> <p><i>'More designed for non- clinical workers'</i></p> <p><i>'Some questions were rather unclear and lead to convoluted answers, more specific questions were needed.'</i></p> <p><i>Less text, more diagrams with a voice over explaining the content.</i></p> <p><i>'Ability to listen as well as read the material - a voice over would be good, with text to support'</i></p> <p><i>'Perhaps sections that specify to pause and reflect e.g. countertransference, can you think of a time where this has occurred, and what was the outcome? How did you feel?'</i></p> <p><i>'A mnemonic (e.g., an acronym) as a quick reference for how to work with people with BPD'</i></p>
<p>General</p>	<p><i>'Nothing - it covers all aspects'</i></p> <p><i>'I can't think of anything as the training was good. Nothing, it is a great e- learning tool that was thorough without being overwhelming or tedious.'</i></p> <p><i>'No, thought it was very good'</i></p> <p><i>'I think it was really good as it is.'</i></p> <p><i>'Absolutely nothing- great training and the experiential and interactivenature of it is superb and makes it real and relatable'</i></p>

Expert consultation

A panel of 89 experts reviewed the content of each of the modules. The consultant experts were predominantly female (78%), with an average age of 40.3 years (SD = 10.69). Professions are listed below.

	N	%
Nurse	35	39%
Social Worker	19	22%
Psychologist	13	15%
Psychiatrist	4	5%
Support Worker	7	8%
Other	10	11%
Total	88	100%

Table 1. Expert consultant professions

Expertise of experts consulted

Experts were asked to rate their self-reported level of expertise, ranging from 'minimal' to 'expert'. Overall self-reported expertise is reported in Figure 1. The majority of experts reported advanced levels of expertise.

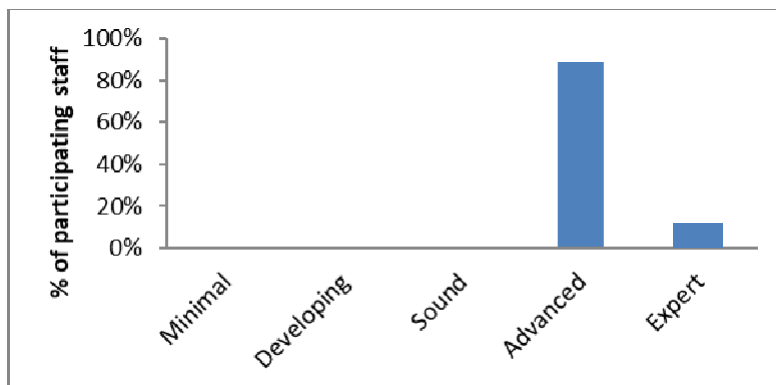


Figure 1. Self-rated expertise of those who completed the e-learning modules ($n = 89$)

Perceptions of the e-learning training

Experts were asked to rate their satisfaction with the e-learning training and how helpful they felt it was for improving outcomes for people with borderline personality disorder. The majority of experts (93%) reported being either satisfied or very satisfied with the training, and 97% reported that they felt the training would be helpful or very helpful in improving outcomes for people with borderline personality disorder (see Figures 2 and 3). Experts were also asked whether they would recommend the e-learning training to a colleague – all experts responded yes to this item.

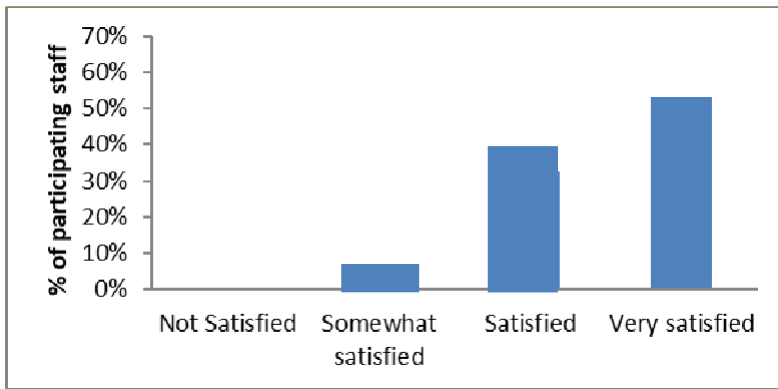


Figure 2. How satisfied were you with the e-learning training? (n = 89)

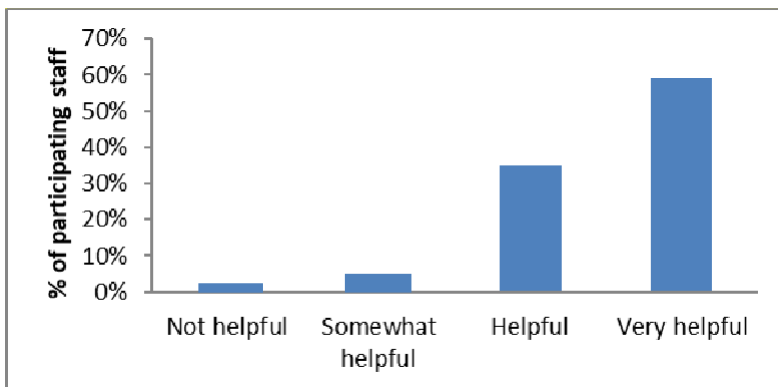


Figure 3. How helpful did you find the e-learning training for improving outcomes of people with complex mental health issues? (n = 89)

Clinical skills, knowledge and attitudes towards people with personality disorders

Experts were asked to rate how useful they found the e-learning training for improving their willingness, optimism, enthusiasm and confidence in working with people with complex mental health issues. They were also asked whether they found the training useful for improving their knowledge and clinical skills with regard to working with people with complex mental health issues.

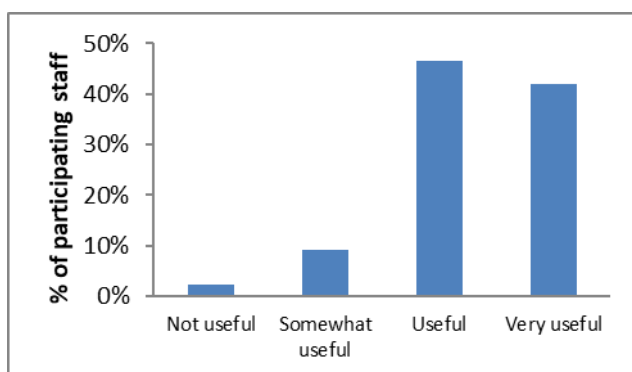


Figure 4. How useful was the training for improving **willingness** to work with people who have complex mental health issues? (n = 87, excluding two due to missing data)

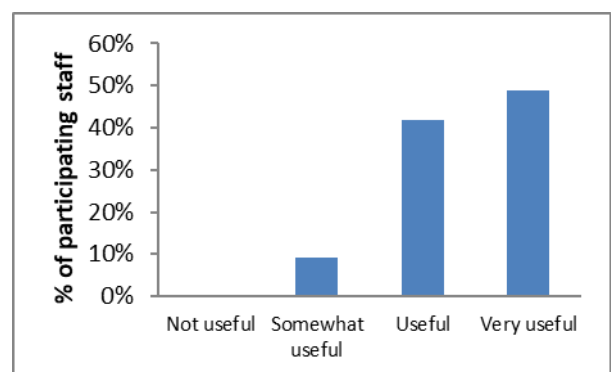


Figure 5. How useful was the training for improving **optimism** with regards to working with people who have complex mental health issues? (n = 87, excluding two due to missing data)

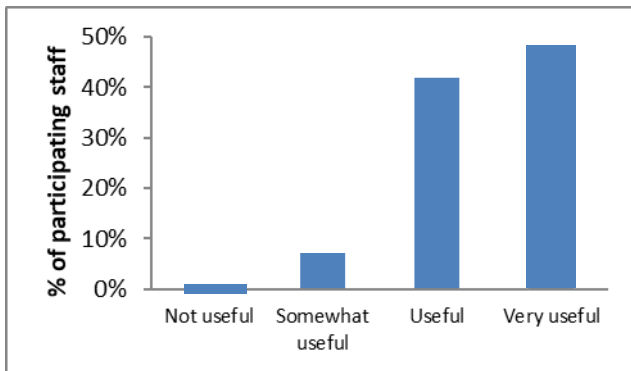


Figure 6. How useful was the training for improving your enthusiasm with regards to working with people who have complex mental health issues? (n = 87, excluding two due to missing data)

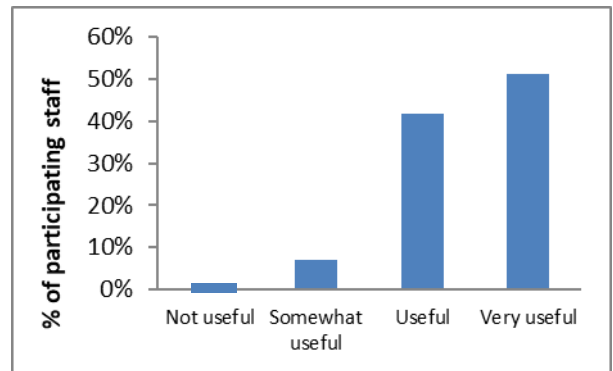


Figure 7. How useful was the training for improving confidence with regards to working with people who have complex mental health issues? (n = 87, excluding two due to missing data)

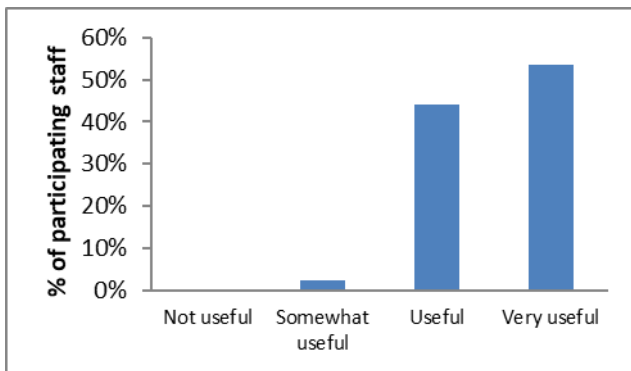


Figure 8. How useful was the training for improving your **knowledge** with regards to working with people who have complex mental health issues? (n = 87, excluding two due to missing data)

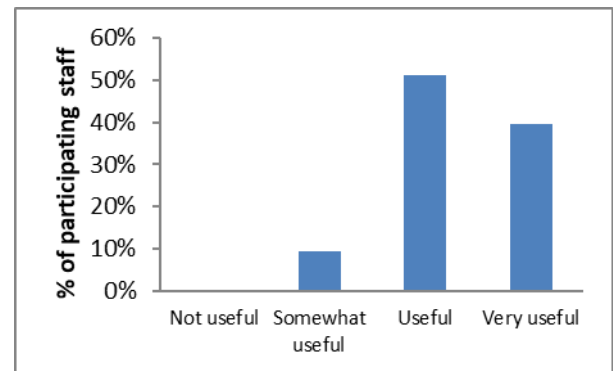


Figure 9. How useful was the training for improving your **clinical skills** with regard to working with people who have complex mental health issues? (n = 87, excluding two due to missing data)

The experts completed five modules during the e- learning training program. Experts were asked to how helpful they felt each module was for improving their knowledge and skills in working with people with complex mental health issues.

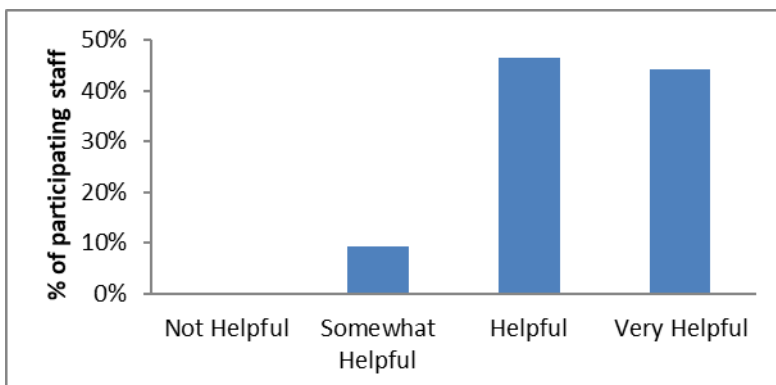


Figure 10. Expert overall rating of Module 1: What is effective care for BPD? (n = 87, excluding two due to missing data)

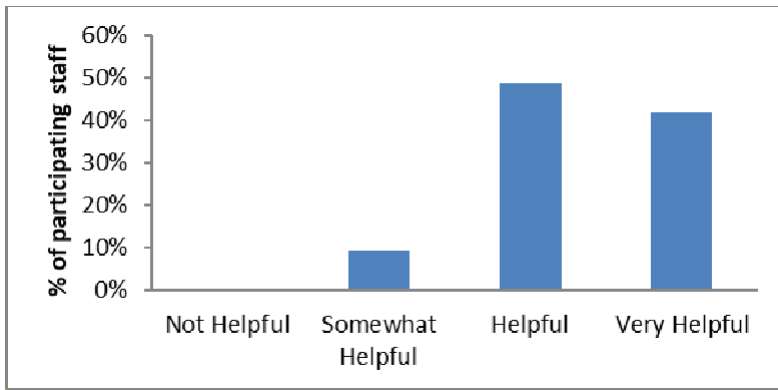


Figure 11. Expert overall rating of Module 2: How to effectively engage people with BPD in treatment. (*n* = 88, excluding one due to missing data)

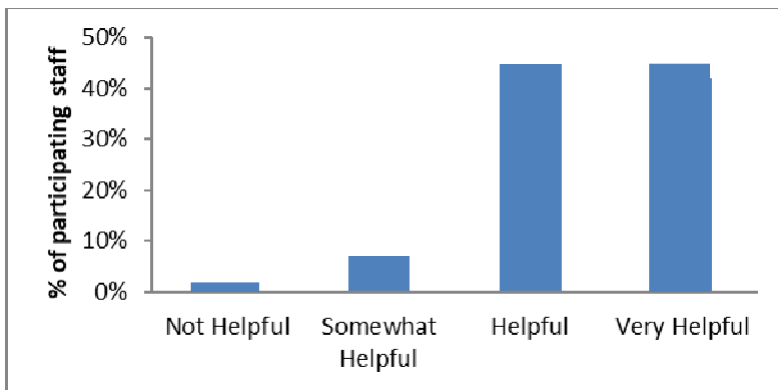


Figure 12. Expert overall rating of Module 3: How to reduce crises and increase safety to promote recovery in people with BPD. (*n* = 88, excluding one due to missing data)

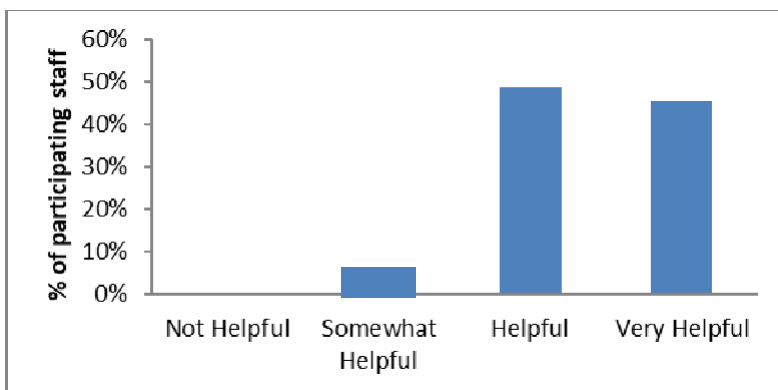


Figure 13. Expert overall rating of Module 4: Working actively with people with BPD and connecting with carers, partners and family. (*n* = 88, excluding one due to missing data)

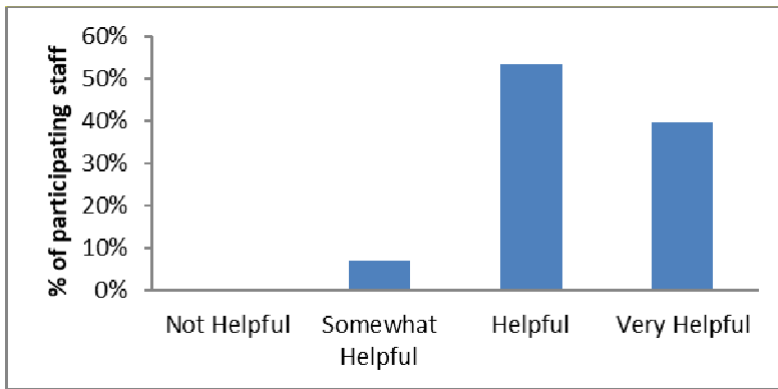


Figure 14. Expert overall rating of Module 5: Successful BPD treatment: A survival guide for health careworkers. (n = 88, excluding one due to missing data)

Expert feedback on the e-learning modules

The expert panellists were asked to comment on what aspects of the e-learning training they found most useful in working with borderline personality. Comments on the training delivery were consistently reported and a consensus of responses is provided below.

Table 2. What aspects of the e-learning training do you believe would be most useful in working with borderline personality disorder? (n = 76, excluding 13 due to missing data)

<p>Research and Background</p>	<p>Increased Understanding of BPD</p> <p><i>‘Understanding case management and countertransference’</i></p> <p><i>‘Understanding the effect it may have on the worker’</i></p> <p><i>‘Confidence, theoretical knowledge’</i></p> <p><i>‘Understanding the underpinning aspects of the diagnosis.’</i></p> <p><i>‘The understanding of BPD’</i></p> <p>Other</p> <p><i>‘References and refresher and new knowledge to work with’</i></p> <p><i>‘Refreshing knowledge base like the fact sheets’</i></p> <p><i>‘The common characteristics’</i></p>
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<p>Clinical skills and practice</p>	<p><i>Countertransference</i></p> <p><i>'Countertransference and how to build a empathic relationship'</i></p> <p><i>'Countertransference and effective management'</i></p> <p><i>'I believe that acknowledging countertransference as a possible occurrence is very important as clinicians often feel ashamed and try to hide it or are unaware which can make it worse.'</i></p> <p><i>'Importance of fostering a sense of agency. Awareness of countertransference. The curious stance'</i></p> <p><i>'Learning how to change your own behaviour in listening and communicating with a patient with BPD is what I found most useful.'</i></p> <p>Effective Treatment Strategies</p> <p><i>'Understanding the five elements for effective treatment' 'BPD and OCD and ID. How to manage multiple diagnosis'</i></p> <p><i>Engaging with Client and Significant Others</i></p> <p><i>'How to respond in Crisis Guidance for staff'</i></p> <p><i>'How effectively engage with a consumer with BPD' 'Working with carers and significant others'</i></p> <p><i>'Management Plans, Supporting the person with BPD (Module 2 &3). It was all useful.'</i></p> <p><i>'The working with families and also the crisis interventions.'</i></p> <p>Other</p> <p><i>'Different dance styles'</i></p> <p><i>'Very informative, great to read over and up skill'</i></p>
<p>Resources</p>	<p><i>'Psychoed and resources'</i></p> <p><i>'Links to resources'</i></p> <p><i>'Handouts for carers BPD specific MP'</i></p> <p><i>'Handouts and forms videos from people with BPD'</i></p>

Online Training Delivery	<p>Videos</p> <p><i>'The videos are extremely helpful, especially from lived experience and carers.'</i></p> <p><i>'Very nicely balanced with theory and supported with consumer and staff videos.'</i></p> <p>Modules</p> <p><i>'Accessible everywhere. More useful for community staff than inpatient but mod 2 was also helpful here.'</i></p> <p><i>'All modules v useful to less experienced clinicians'</i></p> <p>Other</p> <p><i>'Clarity of presentation'</i></p> <p><i>'User friendly and easy to understanding content.'</i></p>
General	<p><i>'All aspects'</i></p> <p><i>'It was all very helpful and insightful.'</i></p>

The expert panellists were also asked to comment on what they believe would improve the e-learning training. Comments on suggested improvements were consistently reported and a consensus of responses is provided below.

Table 3. What are some of the things you would have liked to see in the e-learning training or you believe would improve the e-learning training? (n = 78, excluding 11 due to missing data)

Clinical skills and practice	<p>Treatment</p> <p><i>'More details about treatments''DBT'</i></p> <p>Skills</p> <p><i>'De-escalation techniques specific for BPD'</i></p> <p><i>'Ways in which clinicians can communicate and challenge each other around their reactions to people with BPD'</i></p>
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<p>Content and resources</p>	<p>Videos</p> <p><i>'A video of a family session'</i></p> <p><i>'Less video'</i></p> <p>Additional Examples</p> <p><i>'More varied practice examples'</i></p> <p><i>'More case scenarios'</i></p> <p><i>'More role plays or demonstrations of effectively responding to people with BPD'</i></p> <p><i>'Video example of managing a crises in therapy with BPD client'</i></p> <p>Additional Resources</p> <p><i>'More resources'</i></p> <p><i>'A printable list of e-resources with hyperlinks for future reference. Recommended further training for those wanting more advanced clinical skills and or credentialing'</i></p> <p>Additional Content</p> <p><i>'More information on counter-transference</i></p> <p><i>'More from pt perspective'</i></p> <p><i>'More self-reflection around case'</i></p> <p><i>'More evidence based guidelines and manual'</i></p> <p><i>'More details about treatments'</i></p> <p><i>'A bit more on people with intellectual disabilities who have also been diagnosed with BPD'</i></p> <p>New Content</p> <p><i>'Gender differences'</i></p> <p><i>'Management of bpd with medications'</i></p> <p><i>'It was well rounded, perhaps something on mindfulness and brain changes (Plasticity)'</i></p> <p><i>'Inpatient unit module. Links to family connections for family discussion of coordinating care where multiple agencies areas involved.'</i></p> <p><i>'Specific areas of BPD'</i></p> <p><i>'More advanced training for people working with people with BPD e.g. on physiology of trauma/anxiety and downregulation during a crisis.'</i></p>
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<p>General</p>	<p>Nothing</p> <p><i>'Nothing - it covers all aspects'</i></p> <p><i>'Nothing - it was great'</i></p> <p><i>'I would not change a thing on the e-learning'</i></p> <p><i>'All very useful. Nothing glaringly obviously missing'</i></p> <p>Other</p> <p><i>'I thought this was presented well'</i></p> <p><i>'Satisfied with the presentation, I believe it covers the topic well'</i></p> <p><i>'I enjoyed this training'</i></p> <p><i>'Happy with resources'</i></p> <p><i>'I think it was great just the way it was'</i></p>
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Overall conclusions from the experts

The following aims to link some of the positive comments with what can be improved.

Regarding research and background, individuals consistently commented that the e-learning increased their theoretical knowledge of BPD, working alongside individuals with BPD and countertransference. Some individuals suggested that additional resources, case scenarios and more varied practical examples would improve this theme. One individual suggested less videos would be more helpful. Conversely, some individuals thought there was no need for improvement in this area.

Regarding clinical skills and practice, most experts found the topic of countertransference most helpful. Further, several individuals thought that the e-learning provided them with effective treatment strategies and skills when engaging with clients. Some suggested further information on countertransference would be useful. Some experts would have liked more examples, such as additional role plays or a video of a family session. Overall, many individuals commented that nothing could be improved.

Regarding resources and content, experts in general found that links, handouts, and videos were helpful, although some individuals reported they wanted more resources. Specific examples of these additional resources included, 'a printable list of e-resources with hyperlinks for future use.' Some individuals would also like additional forms of content regarding BPD. These include, information on gender differences, mindfulness, brain changes, physiology of trauma/anxiety and downregulation during a crisis. An individual also suggesting an additional module looking at inpatient care. They also suggested links to family connections for family discussion of coordinating care where multiple agencies areas are involved would be useful. On the other hand, several individuals commented that no improvement needed to be made in this area.

Regarding general comments, several experts commented that they enjoyed every area of the e-learning whilst others had no suggestions because they were pleased with the quality of the training.

In relation to the difference between a "helpful" versus "very helpful" rating, experts noted that an e-learning platform can only achieve so much in relation to improving a clinician's skills. One expert noted that "Face-to-face training, clinical supervision and on-going experience is required to further move trainees from having good knowledge and skills from the e-learning resource, to having practical applied experience in the workplace."

Recommendations

The agreement that Project Air entered into as a consortium partner for Stage Two of the Toward a National BPD Training and Professional Development Strategy expired on 30 April 2021. Stage Two aimed to upskill and engage clinicians working with people with borderline personality disorder and their families. Given the increasing uptake from clinicians in undertaking the e-learning program, as presented below, and the overwhelming positive feedback from participants, we believe that Stage Two achieved its aims and was cost-effective.

This section presents some options for the Australian BPD Foundation to extend the e-learning program by continuing to commission Project Air to continue to host the e-learning modules, and the provision of professional development recognition to health workers and service providers who complete the program. In addition, we present some options to implement some of the recommendations from the final review, presented earlier.

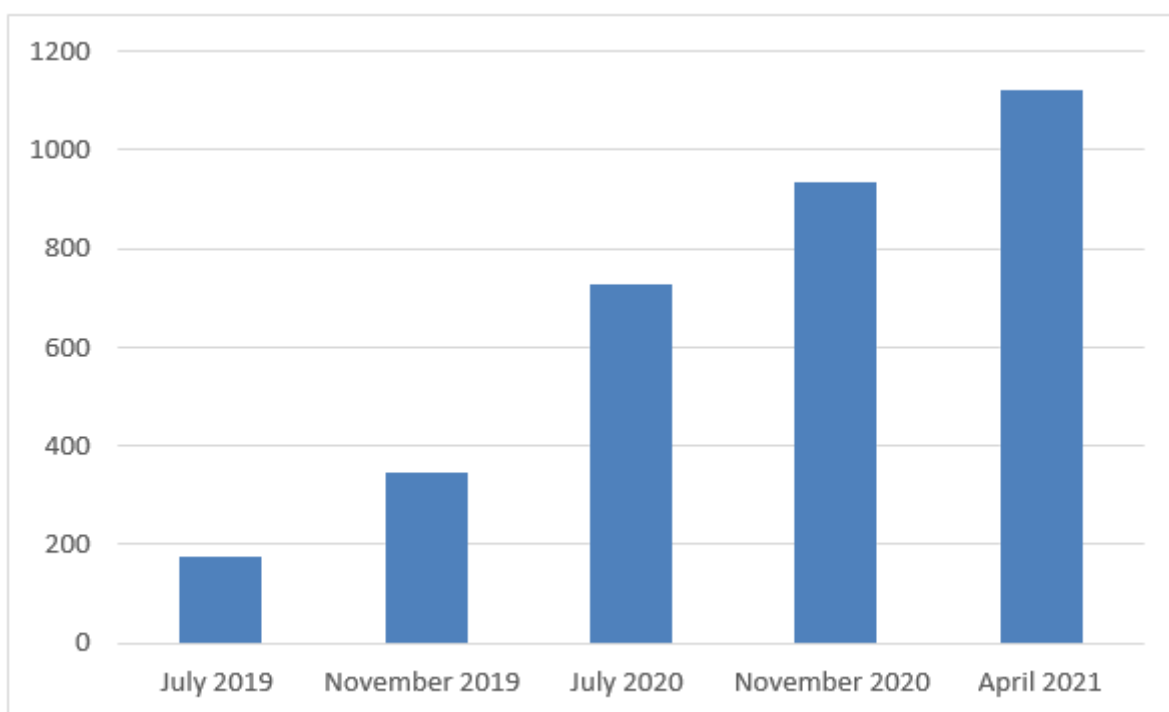


Figure 1: Effective psychological treatment for borderline personality disorder: An e-learning training program for mental health workers and service providers – total participant numbers.

EFFECTIVE PSYCHOLOGICAL TREATMENT FOR BORDERLINE PERSONALITY DISORDER

An e-learning training program for
mental health workers and service providers



MODULE 1 – What is effective care for BPD?



MODULE 2 – How to effectively engage people with BPD in treatment



MODULE 3 – How to reduce crises & increase safety to promote recovery in people with BPD



MODULE 4 – Working actively with people with BPD: Connecting with carers, partners & family



MODULE 5 – Successful BPD treatment – A support guide for mental health workers

Options for continuing support of the e-learning program

As noted earlier in this report the expert panel (n = 89) from different professions, backgrounds and work contexts reviewed the content of each of the modules and were asked to rate their satisfaction with the e-learning training and how helpful they felt it was for improving outcomes for people with borderline personality disorder. The majority of experts (93%) reported being either satisfied or very satisfied with the training, and 97% reported that they felt the training would be helpful or very helpful in improving outcomes for people with borderline personality disorder. Experts were also asked whether they would recommend the e-learning training to a colleague – all experts responded yes to this item.

The report presents overall conclusions from the experts in order to link some of the positive comments with what can be improved, including a comment that *"Face-to-face training, clinical supervision and on-going experience is required to further move trainees from having good knowledge and skills from the e-learning resource, to having practical applied experience in the*

workplace." The evaluation of the e-learning resource should be seen in this context i.e., as one part of a broader strategy.

In order to keep the program going and ensure it continues to meet world class standard and reflects current best practice we believe it is important that recommendations from this final review of the modules are reviewed and implemented as appropriate.

In particular, based on the feedback and developments in the field since we developed the program, we believe there is an opportunity for e-learning enhancements:

1. **Lived Experience Enhancement.** Develop stronger resources for enhanced lived experience voices throughout the training.
2. **Peer Workforce Enhancement.** There is an increased attention on using a peer workforce and models applied to BPD could be included. This would be new content.
3. **Working with families.** There was also feedback about better reaching out and working alongside family members and carers as a priority. This would also lead to new resources.
4. Finally, **demonstration videos** around assessment and key intervention skills would enhance the learning points and again represent new material that would respond to suggestions for improvement.

According to the Stage Two proposal the Mental Health Professionals Network (MHPN) has a database for example, which includes more than 40,000 practitioners, including more than 3,000 general practitioners, 700 psychiatrists, 12,000 psychologists, 2,500 mental health nurses, 5,000 social workers, 2,600 counsellors, 2,300 nurses, 1,600 occupational therapists, and a range of other clinicians who provide mental health services. These practitioners come from across the country, including those in rural and remote regions.

Using the MHPN network alone indicates that there is still a vast network which has not yet utilised the eLearning training opportunity. In order to continue this important work to assist in upskilling the mental health workforce we present options for:

- Maintenance and hosting of the program for three years; and
- Maintenance and hosting of the program for three years, plus enhanced development with new module on lived experience, peer support and enhanced family connection resources.

Main budget items

Option 1:

Maintenance and hosting of the program for a further 36 months. The budget is for a further three year period

Reductions in the budget are possible e.g. 1 year maintenance and hosting = \$1880 (ex GST)

Budget summary

Administration ¹	5,635
Total²	5,635

1. Costs associated with promotion, hosting, costs associated with issuing CPD certificates, ensuring sustained and secure accessibility to the e-learning program.
2. Does not include GST (Total with GST \$6,198.50)

Option 2:

Maintenance and hosting of the program for 36 months and enhanced development with new materials on lived experience, peer support, family resources and clinician assessment/treatment demonstrations. The budget is for a three year period.

Budget summary

Project delivery costs ¹	62,100
Total²	62,100

1. Includes promotion, administration and hosting of the e-learning program, enhanced development with new module on lived experience, peer support and enhanced family resources (includes development of scripts and new filmed video material and video demonstrations), provision of professional development certificate of completion, and a full written report, including an evaluation of changes in staff confidence, skills and knowledge, from the training.
2. Does not include GST (Total with GST \$68,310)