

Appendices: supplementary online material

Appendix 1

Evaluation of changes in staff attitudes, knowledge and beliefs about supporting self-management

The following statements showed a significant change towards concordance with the Bridges supported self-management approach after training (pre- versus post- training, using Wilcoxon signed rank test):

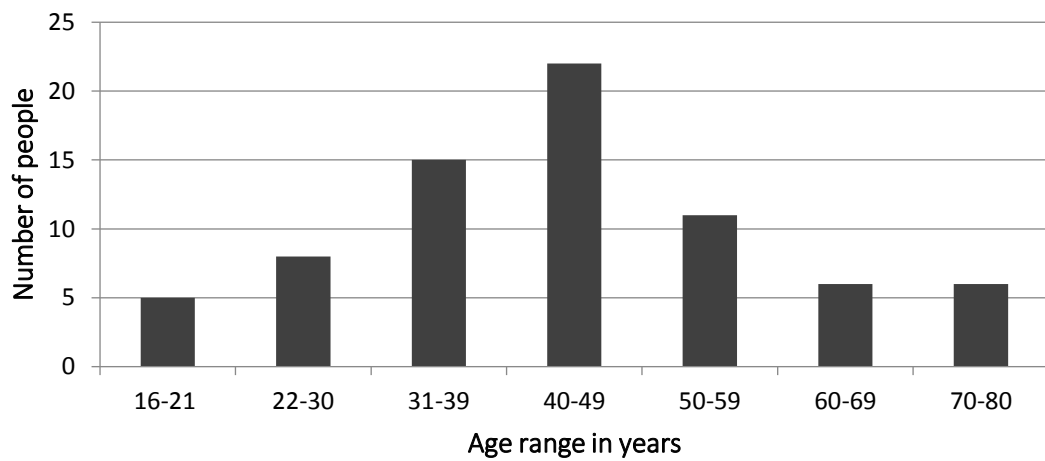
- Educating people with TBI is the most important part of supporting self-management (fewer participants agreed post-training; $p=0.004$)
- A specific time needs to be set aside to support self-management (fewer participants agreed post-training; $p=0.045$)
- It is important to guide people with TBI to set 'SMART' goals¹ (fewer participants agreed post-training; $p=0.006$)
- Practitioners should use their experience and expertise to direct the goal setting process (fewer participants agreed post-training; $p=0.001$)
- It is important to advise an individual if they have unrealistic hopes about what they can achieve (fewer participants agreed post-training; $p=0.004$)
- Goals phrased in the person's own words can be more effective (more participants agreed post-training; 0.01).

1. 'SMART' (specific, measurable, achievable, realistic/ relevant and timed [67]) goals are considered inconsistent with the Bridges approach to supporting self-management approach.

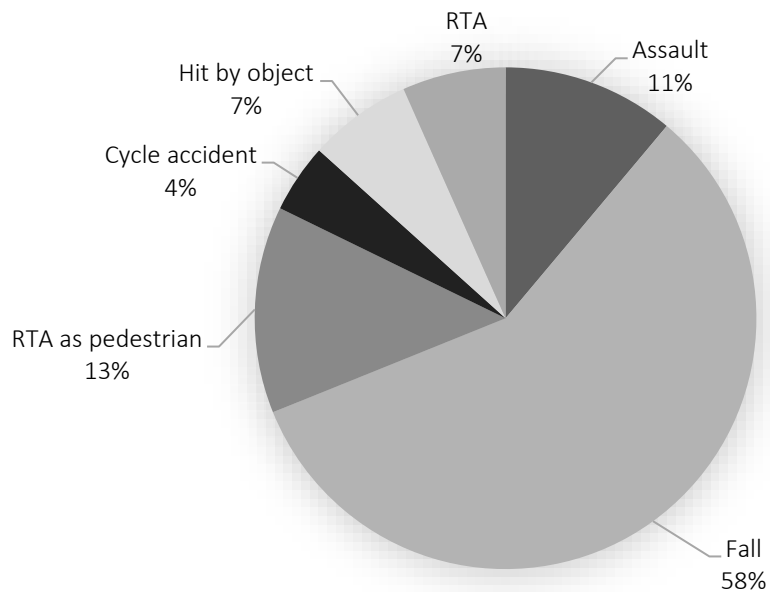
Appendix 2

Demographic and injury-related data for patient sample receiving intervention

**Ages of patients introduced to Bridges
in all project settings (n=73)**

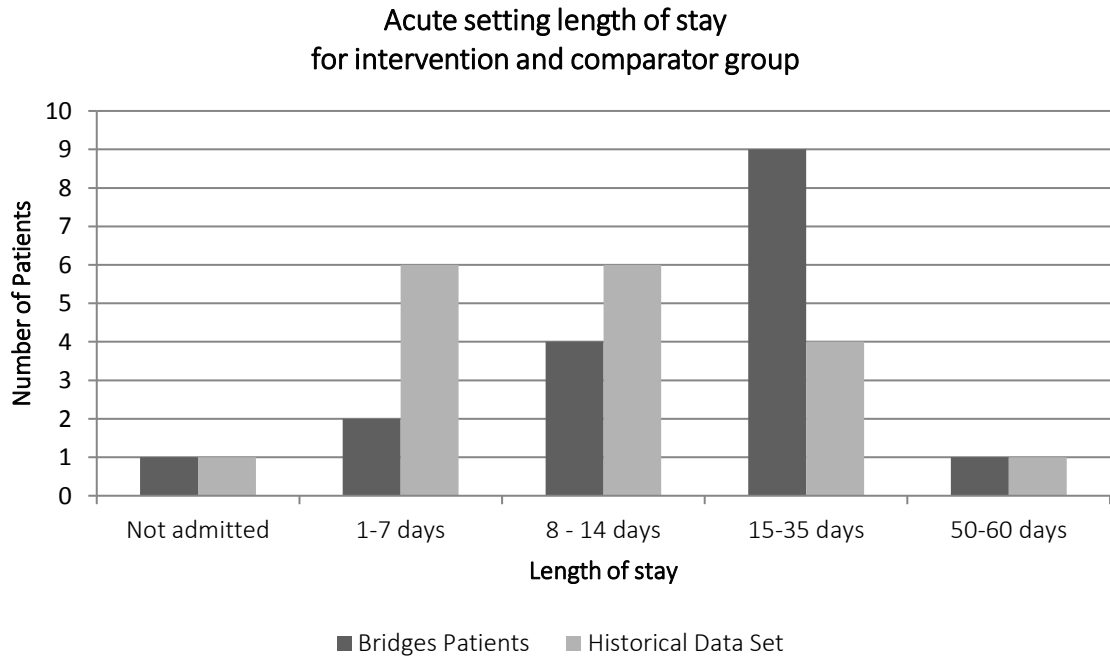
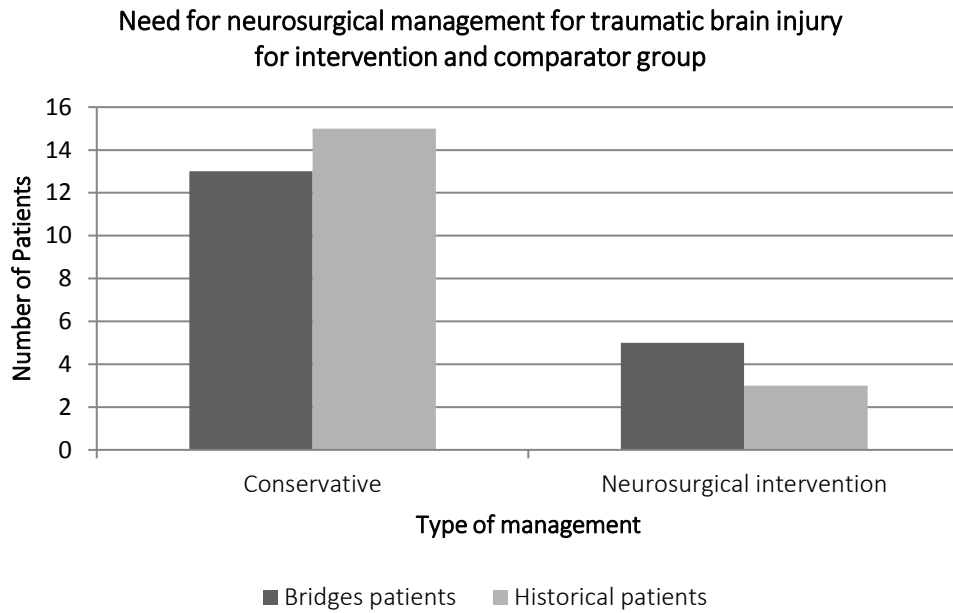


**Cause of brain injury: patients introduced to Bridges in acute setting
(n=36)**



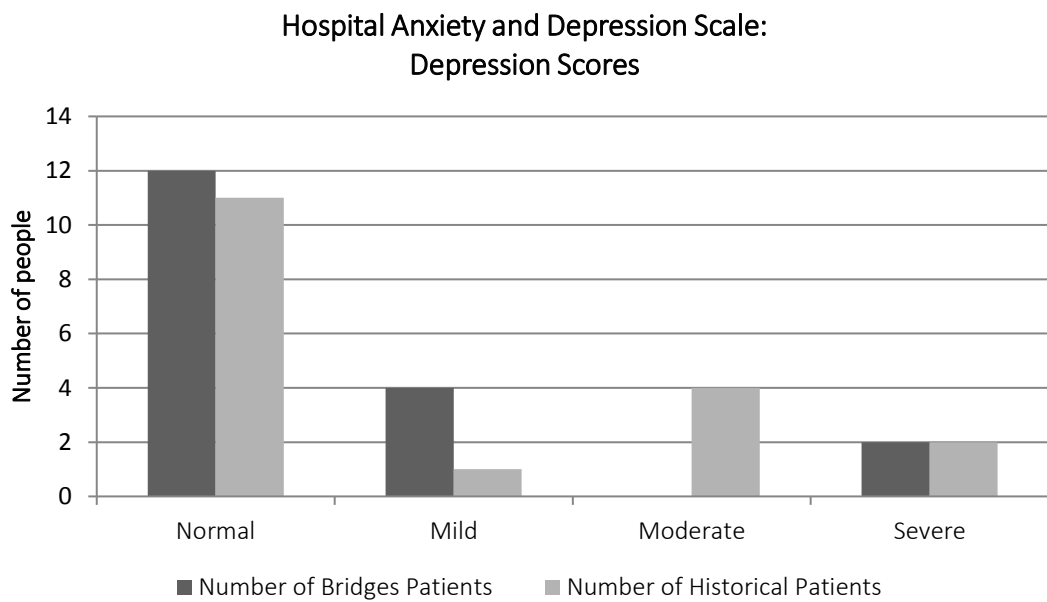
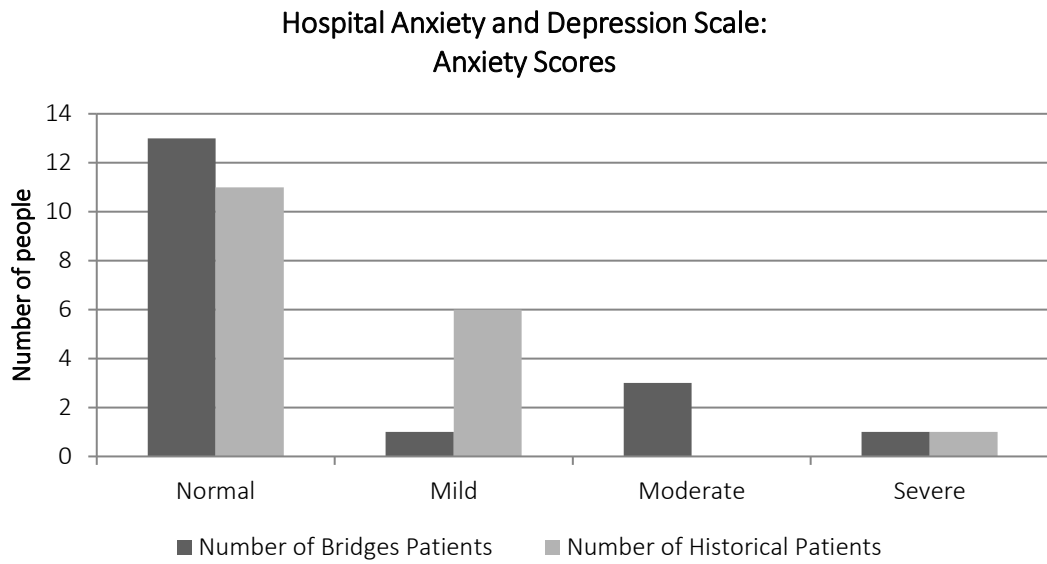
Appendix 3

Markers of injury severity for intervention and historical comparator groups

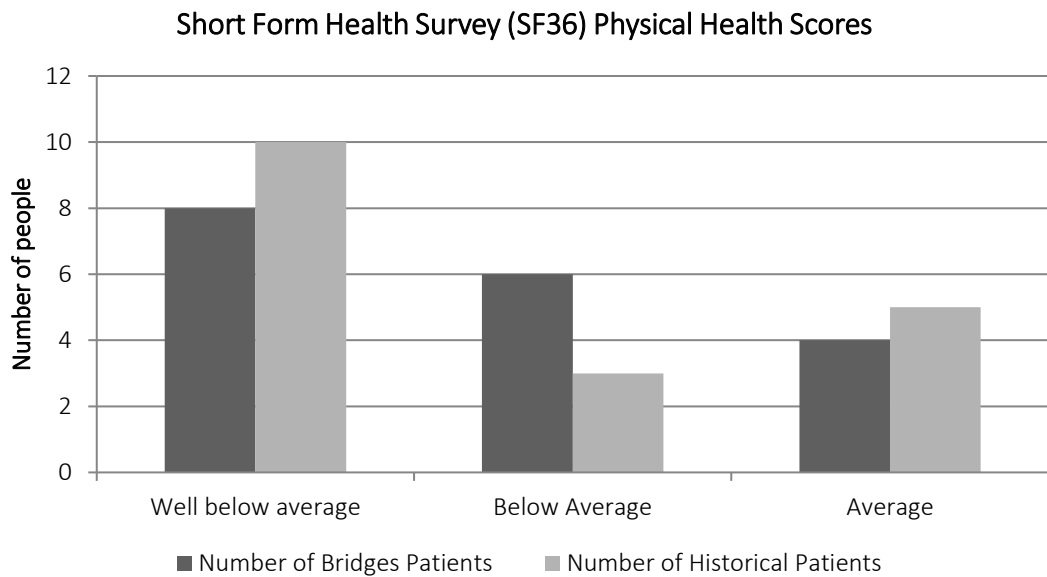
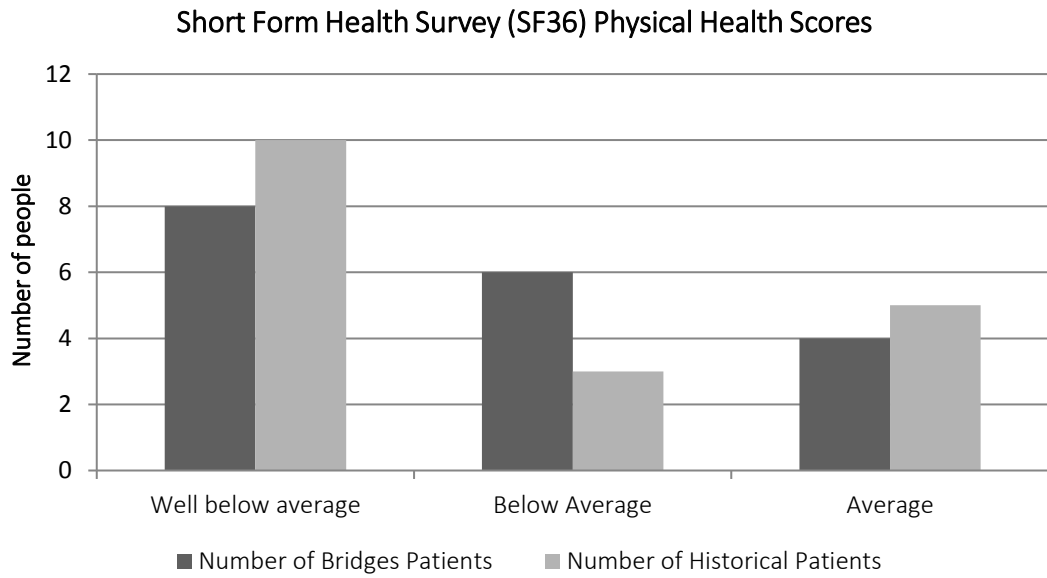


Appendix 4

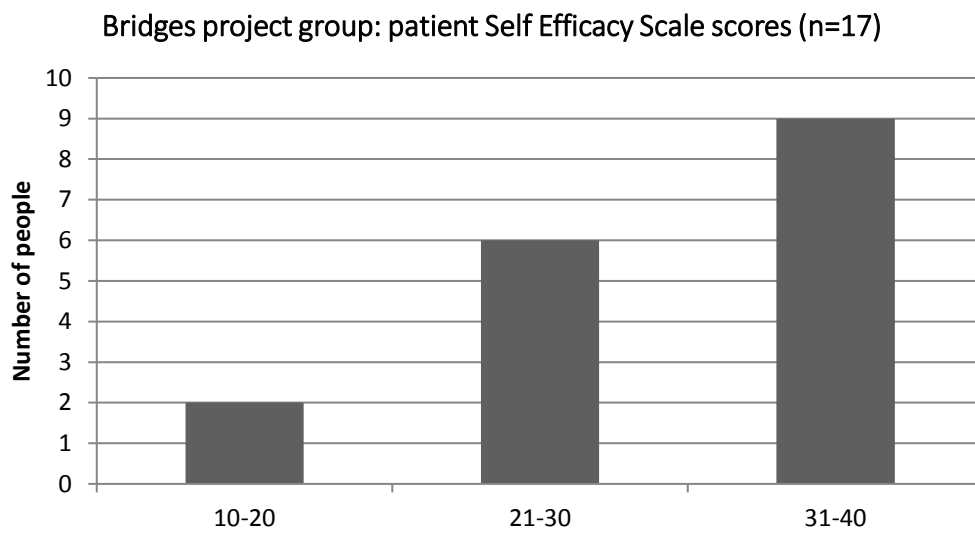
A) Data for patient sample receiving intervention and comparator group: Hospital Anxiety and Depression Scale (HADS)



B) Data for patient sample receiving intervention and comparator group: Short Form Health Survey (SF36)



C) Data for sample of patients receiving intervention: Self Efficacy Scale (not available for comparator group)



Scoring guide: the minimum possible score on this measure of self-efficacy is 10, with a maximum possible score of 40. A higher score indicates higher self-reported self-efficacy.