



Peer Specialists Fall 2020 Brain Injury Series

Part, 4, Pulling it all Together!

Martin Kerrigan & Anastasia Edmonston



Welcome Back

Welcome Back to Part IV, the last in our Series! Before we dive in

Are there any questions from what we discussed last week? If so, Please put them in the Chat.

Marylan

The Lookout-Review of our Series through the movie!

Watch this scene from the 2007 movie, *The Lookout*:

- What are the character's barriers?
- What are the character's strengths?
- What are the strategies he is using to compensate?



What we will discuss today...

We will share stories, answer questions, talk about resources and paths to continued support and recovery for those living with a history of traumatic or acquired brain injury

Specifically, we will....

- Ask about any circumstances where you worked with someone that you knew at the time, or (now suspect) was living with a brain injury, was there something you did, say or refer them to that made a positive difference
- Hear two personal stories
- Provide specific suggestions for information and referral
- Review the main ideas from our series, no one will flunk the post-test, NOT
 ON OUR WATCH!!



Please share your experiences supporting individuals with brain injury was there something you did, say or refer them to that made a positive difference

Throw it in the Chat or unmute yourself and chime in!



Quick review of key points....

True or False

By using the TBI and ABI Screening Tool, we can diagnosis whether or not someone has a brain injury

True or False

Most TBI's are severe



One Person's Story

Stasia-Moderator



Did listening to this amazing story remind you of someone you supported? If yes, can you tell us a little about your experience

Respond in the Chat or unmute yourself to Share



Information and Referral



How to support individuals, pulling together the patchwork of resources

#1-Call the Brain Injury Association of Maryland, 1-800-221-6443 www.biamd.org

BIAMD is your go to for:

- ➤ Brain Injury Support group information
- ➤ Referrals to medical specialists, including but not limited to:
 - Neurologists and Neuropsychologists and Neuropsychiatrists
- ➤ Where to go for specialized brain injury related services, including but not limited to:
 - Inpatient rehabilitation services
 - Outpatient brain injury services
 - Maryland Brain Injury Waiver Services



Trauma and acute care scenario (using the example of a severe TBI):

John was in a car accident when a truck hit him from behind while he was at a stop light. First responders needed to use the jaws of life to extract him from his vehicle

He was taken to Maryland's Shock Trauma where doctor's stabilized him and used state of the art techniques to measure and treat the swelling of his brain that resulted from his closed head injury. He also was treated for several broken ribs.

He remained in ICU, heavily sedated and intubated. Over two weeks he began to stabilize, gradually the medical team began to reduce the sedation medications. He began to respond to stimulation such as touch and brief verbal commands, such as "John, squeeze my hand". While he was in Shock Trauma, the physical therapists did passive range of motion exercises to keep his joints and muscles flexible. As he regained consciousness, speech therapists monitored his swallowing status to determine when the feeding tube could be safely removed



Inpatient Rehabilitation (using the example of a severe TBI):

John made rapid progress in his level of alertness and medical stability. His ribs were healing nicely. He spent a week in a step down unit and then was transferred to the University of Maryland Orthopaedic Institute to a specialized brain injury rehabilitation program. There he engaged in:



Inpatient Rehabilitation (using the example of a severe TBI):

Physical Therapy- therapists were able to work on increasingly challenging tasks. John went from treatment at bedside to sitting up with assist, sitting independently, transferring from bed to chair and from chair to toilet. Soon he was walking with maximum assistance, two therapists and a quad cane, by the end of his second week he was walking with minimal assist, and with a straight cane. He was still weak and his balance was not 100%. His broken ribs continued to heal.



Inpatient Rehabilitation (using the example of a severe TBI):

Occupational Therapy: John's OT's worked on a number of functional skills that enabled him to take care of his personal hygiene, dressing, preparing meals as well as helping him compensate for his post brain injury double vision issues through exercises. They also made recommendations for home modifications such as adding a railing to the front steps and grab bars in his bathroom as to ensure he didn't risk a fall and possible addition injury while he recovered at home



Inpatient Rehabilitation (using the example of a severe TBI):

Speech and Language Therapy: John worked with his speech and language therapist to make sure he is able to swallow soft and eventually solid foods and thin liquids (he is SOOO happy to be able to enjoy his morning coffee without "Thick-It" in it!). They also help him with being clear in his speech, suggesting he over articulate to help him overcome the slurring of speech the injury left him with. The Speech Therapist also helps with all aspects of communication, understanding what he is hearing and reading as well as helping him express himself with his verbal and written communications. Together with his OT, they work on strategies and supports for memory, attention comprehension and organization



Outpatient Rehabilitation Services (using the example of a severe TBI):

John has made such great progress, after 3 weeks of inpatient therapy he is discharged to home with orders for continued physical, occupational, and speech therapy at a nearby outpatient clinic for people with brain injury related rehabilitation needs.

The therapists there continue to work on improving John's functioning as his brain continuous natural healing and improvement.



Other professionals and services John may have from benefited along the way

- Case manager, social workers
- Recreational Therapists
- Nutritionists/Dietitians
- Patient Transportation professionals
- PT, OT assistants and aides
- Certified Nursing Assistants
- Nurses
- Physicians and Physician's Assistants



What else?

Depending on severity of injury, ability to resume employment and life in the community, people like John who have incurred a brain injury may need additional supports, if only for a short period of time.



Resource

Social Security Disability Insurance (SSDI)
Supplemental Security Income (SSI)

What is their role

These two programs are administered by the Social Service Administration.
SSDI is available to those who have worked 40 hours
SI is available to qualified disabled adults and children

Resources and Contacts

Online: www.ssa.gov, call 1-800-772-1213. You maybe able to apply on line or by phone, or find out where your local Social Security Office is located so you can apply in person.

If an individual is living with a brain injury and is homeless or at risk of homelessness, and have a mental illness and/or co-occurring substance use disorder, it is recommended you utilize MD SOAR Works, SSI/SSDI Outreach, Access and Recovery, go to https://soarworks.prainc.com/states/Maryland to find a SOAR specialist in your area



Resource

What is their role

Resources and Contacts

Maryland Division of Rehabilitation Services (DORS), Acquired Brain Injury Counselors DORS ABI Counselors specialize in serving individuals living with brain injuries. DORS can pay for a full evaluation (including a neuropsychological evaluation), and rehabilitation services in addition to vocational evaluation and supported employment services

Go to:

https://dors.maryland.gov/consumers/specialized/Pages/ABI.aspx for the name and contact information for the ABI Counselor in your county. You can also contact the Office of Field Services by calling the Workforce & Technology Center at: 1-888-200-7117

Developmental Disabilities Administration (DDA)

DDA provides service coordination to individuals who were either born with a disability, or who experienced a disabling event or illness prior to the age of 22

Go to:

https://dda.health.maryland.gov/ Pages/home.aspx



Resource

What is their role

Resources and Contacts

Maryland Access Point, located in the local county Area Agencies on Aging

Information and Referral for older adults and individuals with disabilities offered on line and in person at local Area Agencies on Aging (AAAs). In addition, the AAAs also offer **Options Counseling for** individuals for individuals living with disabilities, older adults and their family members/supporters.

Call 1-844-627-5465
https://www.marylandac.cesspoint.info/consite/index.php?mobile=false



Break Time! Take 10 minutes to stretch etc.





Let's brain storm suggestions and resources for these hypothetical situations

45 year old woman, involved in a fender bender, 3 weeks later still
experiencing headaches, fatigue and some concentration and memory issues,
any suggestions?

A 21 year old man has a moderate brain injury (unconsciousness for 24 hours)
 after being knocked down in a fight outside a bar hitting his head on the curb.
 He is discharged from the hospital, is in physically good shape, but his family is really worried about his ability to return to his classes at the local community college.

Let's brain storm suggestions and resources for these hypothetical situations

- A 80 year old woman fell and hit her head, she is a month post her injury, she was treated and released from the hospital but is having difficulty pulling her thoughts together and expressing herself
- A 55 year old man clearing debris out of his gutters falls 10 feet off a ladder onto the ground. He was in a coma for 3 days and received rehabilitation inpatient and outpatient services. He is intending on returning to work as a manager for a auto part store, but his family and therapists have concern



One Person's Story

Martin-Moderator



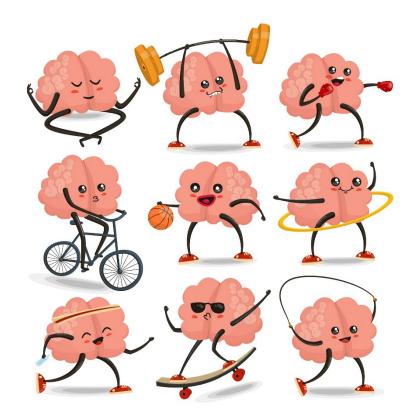
How we can prevent Brain Injuries? How can we improve our brain health, especially as we age?

What follows are evidence based suggestions from the medical literature and subject matter experts



Boosting the Brain

What else can we do to boost our brains (cognitive reserve) and reduce our fall risk?





Brain Health

- The Cardiovascular Health Study, begun in 1986, produced data on the evaluations of nearly 6,000 older men and women
- The top quartile of active people proved to have substantially more gray matter in those parts of the brain related to memory and higher level thinking
- Those whose physical activity increased over a five-year period showed notable increases in gray-matter volume in those same parts of their brains
- Those who had more gray matter correlated with physical activity also had
 50 percent less risk of experiencing memory decline or Alzheimer's



Fall Prevention

- Keep stairs clear
- Use double-sided tape to keep rugs from slipping (or remove)
- Grab bars in the bathroom
- Use bright light with lampshades and frosted bulbs to reduce glare
- Handrails on stairs
- Discuss medications with health care provider

- Consider wearing single-vision lenses while out of familiar environments as bifocal and progressive lens can cause missteps
- Check vitamin D levels
- Keep hydrated esp. on hot days/for those with low blood pressure
- Use a nightlight
- Install light switches at the entrance of rooms
- Wear shoes with rubber soles

Source: Brainline.org, cdc.gov, New York Times (2014) Katie Hafner



Stopping Elderly Accidents, Deaths & Injuries-STEADI-Centers for Disease Control & Prevention

https://www.cdc.gov/steadi/patient.html included in your handouts

Information on fall prevention for individuals and family members/caregivers, including 4 brochures on the topics of:

- Family Caregivers: Protect you Loved Ones from Falling
- Check for Safety, a Home Fall Prevention Checklist for Older Adults
- What YOU Can Do to Prevent Falls
- Stay Independent Brochure
- Chair Rise Exercise
- Postural Hypotension-What it is and how to manage it



Create Your Own Blue Zone!

https://www.bluezones.com/

A team of researchers, initially funded through National Geographic, looked at communities around the world where people frequently lived to a robust 100 years of age. The original Blue Zones include; Barbagia region of Sardinia, Ikaria Greece, Nicoya Peninsula, Costa Rica, Loma Linda California (large 7th Day Adventist Population and Okinawa Japan.



Ingredients of the Blue Zones

- Move naturally-build movement into your day, you don't need to crush it at the gym!
- Right Outlook- have a sense of purpose in your life, knowing your sense of purpose is "worth having up to 7 extra years of life expectancy!
- Downshift, pray, medicate, nap, enjoy happy hour (not necessary with alcohol, it's being with friends and families that matters)
- 80% Rule- stop eating when you are 80% full, not stuffed
- Plant Slant-"beans are the cornerstone of most centenarian diets", meat may be eaten 5 times per month on average
- Belong-for the centenarians having a faith-based community (doesn't matter which) makes a difference
- Family First and close supportive circle of friends that positively influence healthy habits

Remember-What is good for your heart is Good for your Brain! From the Cleveland Clinic-6 Pillars of Brain Health

https://healthybrains.org/pillars/

- 1. Physical exercise-moving regularly can lower your risk of Alzheimer's disease!
- 2. Food & Nutrition-Food rich in antioxidants can fend off damage from lifestyle and environmental factors-research suggests that following a Mediterranean style diet is good for your brain, grains, green leafy vegetables, olives, nuts, fruits and vegetables! Small portions of fish
- 3. Medical Health-manage your blood pressure, diabetes, weight, mental health, cholesterol and do what you can to prevent head trauma



Remember-What is good for your heart is Good for your Brain! From the Cleveland Clinic-6 Pillars of Brain Health https://healthybrains.org/pillars/

- 4. Sleep and Relaxation-sleep helps mood and your immune system!
- 5. Mental Fitness- boosting your "brain reserve"

"......habitual exercise has a variety of positive effects on the human body, from regulating cardiorespiratory and cardiovascular fitness, to improving glycaemia and insulin response. In addition, as discussed, it is a way of maintaining not only a healthy body, but also a healthy mind, at any age. In particular, it can represent a non-pharmacological (and sometimes enjoyable) strategy to delay the effects of both physiological ageing and pathological neurodegeneration on brain health." Di Liegro CM, Schiera G, Proia P, Di Liegro I. Physical Activity and Brain Health. Genes

(Basel). 2019;10(9):720. Published 2019 Sep 17. doi:10.3390/genes10090720

To get the benefits, you just have to move!

- The Cardiovascular Health Study, begun in 1986, produced data on the evaluations of nearly 6,000 older men and women
- The top quartile of active people proved to have substantially more gray matter in those parts of the brain related to memory and higher level thinking
- Those whose physical activity increased over a five-year period showed notable increases in gray-matter volume in those same parts of their brains
- Those who had more gray matter correlated with physical activity also had
 50 percent less risk of experiencing memory decline or Alzheimer's



Accept the challenge!



Breakout Rooms- Teams develop questions to challenge each other's Brain Injury knowledge!

Each team will come up with one "closed answer question," for example: "The sky is_____ when the sun is shining." (correct answer is "blue")

And one multiple choice question, for example:

"The Maryland State bird is the:

- a) Blue Bird
- b) Raven
- c) Oriole

(correct answer is "Oriole")





Teams come back from the breakout rooms and will try to stump each other with the questions they have developed.



Fall Prevention

"If only we could put tai chi in a pill."

-Dr. Lewis A. Lipsitz of Harvard University, on the improvements in balance and strength in seniors at a retirement facility after participation in a 12-week tai chi program



Resources: Free Exercise Videos-Low Intensity

- Fit Body by Ashley: Low Impact Cardio Dance Workout https://youtu.be/q8hwX2UvbVA
- Walk at Home, Leslie Sansone's https://www.youtube.com/channel/UCVI6ZdsIZz2Zj-34bMJFPbg
- Yoga with Adriene, free yoga videos for all levels, https://yogawithadriene.com/
- IvanaExercise, three videos that feature exercise routines for those living with physical and intellectual disabilities https://www.youtube.com/channel/UCPXE-jqHLk40lYltj_qX4dQ

Consult your healthcare provider before starting any exercise program



Resources: Free Exercise Videos-Moderate to High Intensity

- Toni Mitchell, https://www.youtube.com/playlist?list=PLQiYAEe4kWikryJGMZNDeaxcnbob1E7Nq
- Fitness Blender, https://www.fitnessblender.com/
- Heather Robertson https://www.youtube.com/channel/UCOpsZxrmeDARilha1uq4slA

Consult your healthcare provider before starting any exercise program



Wrap Up

- Questions
- Comments



Thank you!!!

Anastasia Edmonston MS CRC

TBI Partner Project Coordinator

MD Behavioral Health Administration

anastasia.edmonston@maryland.gov

Martin Kerrigan

Contract employee

Maryland Behavioral Health Administration

DEPARTMENT OF HEALTH

martin.kerrigan@maryland.gov

"This project was supported, in part by grant number 90TBSG0027-01-00 from the U.S. Administration for Community Living, Department of Health and Human Services, Washington, D.C. 20201. Grantees undertaking projects with government sponsorship are encouraged to express freely their findings and conclusions. Points of view or opinions do not, therefore, necessarily represent official ACL policy."