Accommodating the Symptoms of TBI

Ohio Valley Center for Brain Injury Prevention and Rehabilitation

With contributions from Minnesota Department of Human Services State Operated Services
Goals of Training

- Service providers should be able to:
  - Recognize common symptoms of TBI
  - Incorporate compensatory strategies into their practices
  - Increase the odds of treatment success for individuals with TBI

- This information is not intended to be used in place of formal diagnostic testing and treatment planning
Why should service providers be aware of TBI?

- According to the CDC, over 1.7 million TBIs occur each year.
- An estimated 5.3 million individuals in the US live with the effects of TBI.
- A history of TBI often goes unrecognized.
Neurocognitive Changes with TBI

Due to frontal lobe damage, TBI can result in changes in:

- Memory
- Thinking skills
- Behavior
Need for Services

- Neurocognitive changes from TBI commonly result in:
  - Substance use problems
  - Disrupted relationships
  - Employment issues
  - Problems with learning

- Service providers are likely to be:
  - Treating individuals with TBI
  - Treating individuals with TBI without even knowing it
What does it mean to “ACCOMMODATE”?

- **Accommodate**: Provide services in a manner that takes into consideration the special needs of an individual

- **Providing accommodations** creates an opportunity to address potential barriers to treatment success
Neurocognitive Challenges to Treatment Success with TBI

- Problems with the regulation of thoughts, feelings and behavior
- Difficulty benefiting from experience and remembering information from one session to the next
- Intention and behavior may be disconnected
- May not fit well with others and the environment because of problems perceiving, understanding, and behaving according to social norms
- Differences in communication or learning style make participation in didactic training and group interventions more difficult and frustrating for the individual
Barriers to Treatment Success

- Lack of experienced staff and referral sources who understand how to adjust their approaches to help individuals with TBI

- Misinterpretation of symptoms of TBI by the treatment provider (e.g. labeling an individual as “noncompliant” or “resistant”), undermining the treatment relationship

- Lack of a consistent and rich environment to provide stimulation, structure, and support

- Discontinuation of treatment before goals are met
Identifying Communication and Learning Styles

- Ask how well the person reads and writes; or observe through samples.

- Find out whether the individual is able to comprehend both written and spoken language.

- If someone is not able to speak (or speak easily), inquire as to alternate methods of expression (e.g., writing or gestures).

- Ask about and observe a person’s attention span; be attuned to whether attention seems to change in busy versus quiet environments.

- Ask about and observe a person’s ability to learn new ideas, information, and routine; inquire as to strengths and weaknesses or seek consultation to determine optimum approaches.
Contextual Understanding of Person

- What has worked in the past, and how?
- What hasn’t worked, and why?
- How interested is the person in working on this? (e.g. on a scale from 1 to 10)
- What would they like to try?
  - How can we help?
  - Comfortable with technology?
- What can we do to help if they are not aware or not motivated?
Reflective Recommendations: People as their own experts

- Ask “What helps you with _____?“
  - Learning new material
  - Remembering names
  - Remembering to do assignments
  - Finishing your work
  - Staying on track
  - Paying attention
  - Remembering things you see or hear
  - Figuring out how to do new things
  - Making choices that keep you healthy and safe
Flow of Cognitive Processes

1 Alertness
2 Attention
3 Processing
4 Memory
5 Executive Function
Neurocognitive Functions

- Attention
- Processing
- Memory
- Executive Function
- Initiation
- Impulsivity
- Planning & Organization
- Mental Flexibility
- Self-Awareness
Aside from being awake and alert, one of the most important cognitive abilities is being able to pay attention or concentrate on important things happening around us. Attention is often affected when frontal regions of the brain are not working properly. Attention is a basic thinking ability that may set a limit on how well other “down stream” functions work.

Look for:

- After a short period is “checked out”
- Seems to not pay attention to what is said
- “Thrill seeking” or excessive risk-taking
- Seeks sensory stimulation (e.g. video games)
- Often appears bored or disinterested
Accommodating Problems with Attention

Attention Grabber
- Check to make sure there is good eye contact and initial attention when beginning a task or activity
- Begin an activity with something that gets everyone’s attention or involves active participation like an ice breaker, a challenge, or demonstration that includes their participation

Break it Down
- Keep instructions brief, simple, and to the point
- Boil down discussions to critical points presented one at a time and organized for the person

Hands On
- Discussions and important meetings can be accompanied with practice or rehearsal to keep the person actively engaged
- Movement and tactile activities enhance energy and attention
Problem = Processing

The time it takes to think through and understand new information or concepts can be affected when a person has had a TBI. This does not mean they cannot understand – they may just need more time to understand.

Look for:

- Only picks up a portion of instructions or conversations
- Has difficulty keeping up with a conversation
- May tire easily
- May appear to “zone out”
- May appear passive or unmotivated
- Is sometimes referred to as “lazy”
Accommodating Problems with Processing

**Keep it Simple**
- It’s easy for someone with processing problems to get lost in a conversation. Simplify information and provide one idea or task at a time.

**Check In**
- Frequently check for understanding by asking the person to repeat back instructions or ideas.

**Slow it Down**
- Make sure to provide sufficient time for the person to process and respond. Count silently to yourself after asking a question to allow extra time for the person to process the question.
Every day our lives are filled with activities that require us to make choices and responses based on previously learned information, newly learned information and sometimes both. Persons with TBI can have trouble recalling or remembering information. They often have problems holding several thoughts at once or organizing several pieces of information in their mind to make a decision or take action.

Look for:

- Inconsistent in performance of tasks or daily activities
- Has difficulty recalling previously learned information
- Has difficulty learning new information
- May appear inattentive
- Does not follow-through with activities or instructions
- May be described by self or others as forgetful
Accommodating Problems with Memory

Write it Down
- Whenever possible, provide a written summary of important information. For example, write down their next appointment and any action items for the week. If they are using an organizational system, cue them to record the information in their calendar.

Repeat
- Review new information frequently and ask them to repeat back what they learned in their own words. This can help make the information more relevant and improve recall of information.
- Summarize and synthesize multiple points into one coherent statement to reinforce learning.

Remember
- It’s important to teach the person to “Remember to Remember”. Teach compensatory strategies such as checking a calendar at the end of a session, or writing a name down as soon as they meet someone. Teach associations that will help trigger recall (e.g. brushing teeth is a cue to take medication).
- Practice and reinforce compensatory strategies until they become automatic.
Responsibilities at home or work require the completion of a sequence of tasks. Individuals with TBI can have difficulty getting started or initiating action. Sometimes a person can tell you what he or she wants to do but cannot initiate the steps needed to perform that activity.

**Look for:**

- Has trouble getting started with a task
- Appears passive or unmotivated
- Needs constant reminders or prompting to complete a task
- Able to identify a goal but cannot act to achieve it
- Often referred to as “lazy”
Accommodating Problems with Initiation

**Simplify**
- Break large projects down into small, more achievable steps (e.g. completing a job application or selecting a place to live)
- Encourage the person to focus on one step at a time

**Check it off**
- The use of checklists and calendars can help organize and prompt self-care activities and daily duties.
- Learning to refer to the checklist when “stuck” can help the person move on to the next step.
- Over time the checklist may be internalized as a familiar routine

**Set an Alarm**
- A timer can be used to help the person get started and learn to focus on being productive for a set period of time
- An alarm can be used to alert the person to start an activity
- Timers or alarms can be as simple as a kitchen or stove timer to something more complex and portable like an appointment feature on a smart phone
Sometimes it is difficult to start an activity, and other times it is hard to stop one. Problems with impulsivity are very common in persons with TBI.

Look for:

- May do or say things without thinking
- May have trouble knowing when to stop an activity
- Appears to do things quickly without regard for safety
- May not follow directions
- May dominate conversation or interrupt
Accommodating Problems with Impulsivity

Stop, Think, Act

- Teaching “Stop, Think, Act” encourages a person to slow down and think about the consequences of a behavior or activity before deciding to act (e.g. Is this a good idea or a bad idea? What might happen? Is this consistent with my goals?)

Immediate Gratification

- Providing incentives for shorter-term goals (e.g. gift cards for attending appointments) may improve compliance in the short term when the person is unable to keep a longer-term goal in mind.

Give Feedback

- Respond directly to inappropriate behavior. For example, say, “What you just said was not OK.”
- Be clear when setting expectations, limits and consequences.
Busy schedules require us to keep track of a lot of information. Many people with TBI have difficulty planning and organizing daily activities, or need assistance with a method of planning and organizing such tasks.

Look for:

- Is often late for appointments
- Has difficulty remembering things that need to be done in the future
- Often misses important deadlines
- Gives up easily on tasks
- Appears to jump from activity to activity without completing anything
Accommodating Problems with Planning & Organization

Be Predictable

- Encourage the person to develop and maintain consistent routines throughout the day
- Identify a place to keep important items like keys, wallet/purse, glasses and calendar

Planner

- Encourage the use of a system for organizing activities, appointments, and “to do” lists that matches the needs and abilities of the person. The system can be a simple calendar or a smart phone or electronic tablet with advanced features
- Apps for smart phones and tablets have been developed to help meet the needs of people with cognitive problems
- Prompt to write down important or key points of information

Set the Agenda

- Remind the person of the purpose of a session as well as what to expect along the way with a description of the final outcome and goal
- Provide directions or instructions several times, and ask the person to repeat the instructions back to you. You can ask, “Now you tell me the instructions in your own words”
Everyday life requires us to switch gears and think on our feet. A new approach may be needed when circumstances change. When someone has difficulty with mental flexibility, he or she has trouble adjusting to changing situations and unfamiliar circumstances.

Look for:

- Has difficulty thinking on his or her feet
- Gets stuck on an idea or one way of thinking
- Has difficulty adjusting to new or unexpected tasks and activities
- May be argumentative and not be able to see the perspective of another person or consider a different idea
Accommodating Problems with Mental Flexibility

Rehearse

• Don’t take for granted that something learned in one environment will generalize to another. It is important to practice strategies in multiple environments with different staff or support persons.

Plan B

• Persons with cognitive problems often cannot come up with solutions or alternatives to situations that don’t happen as planned. Try to plan for obstacles and come up with a “Plan B”. For example, identify a lead or mentor in the environment who can serve as a resource to use if problems occur in the program or on the job. Practice going to that person and asking for assistance.

Moving On

• It’s easy for persons with cognitive problems to get stuck on a topic or idea. When reviewing material, announce that you are moving on to a new subject and allow extra time for that transition. Providing handouts and an agenda may also be helpful.
We take for granted that people know how they are being perceived or how they are coming across. Individuals with TBI often have problems with their behavior and may not be aware of how they are being perceived by others.

Look for:

- Underestimates problems or may not be aware that a problem exists
- Often sets unrealistic goals
- Is unable to identify or alter inappropriate behaviors
- May say things other people might be thinking but would not say aloud
- May use language that is not appropriate for the situation or audience
- May dominate interactions with others
Accommodating Problems with Self-Awareness

**Plan**
- Plan ahead for situations that may bring about poor judgment and talk about potential obstacles

**Practice**
- Practice positive social interactions ahead of time
- Cue for compensatory strategies

**Promote**
- Promote positive behavior by stopping and addressing undesired behavior immediately.
- Provide alternative comments or choices that could have made
Identify specific problems that are potential barriers to treatment success

Develop clear strategies to accommodate problems, taking into account a person’s unique communication and learning styles

Provide direct feedback regarding inappropriate behavior

Keep in mind that noncompliant behavior may be a symptom of TBI

Be patient! An individual with TBI will need extra time and practice to achieve his or her goals
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http://ohiovalley.org
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