

Speakers & Sessions Thursday, April 30

Mitch Rosenthal Memorial Lecture & Award Presentation 9:00 a.m. - 10:15 a.m.

What's Really Changed in Three Decades of Cognitive Rehabilitation? McKay Moore Sohlberg, Ph.D., CCC-SLP

Blue Ridge Ballroom



Dr. McKay Moore Sohlberg is a Full Professor and Director of the Communication Disorders & Sciences Program at University of Oregon and a Fellow of the American Speech Language and Hearing Association. Dr. Sohlberg conducts research and teaches in the area of cognitive rehabilitation. Her most recent interest has been in the design of interventions to help individuals return to learn or community after concussion. She is the co-author of several leading textbooks in the field and has received several teaching and clinical awards. Dr. Sohlberg has been funded for a number of federal projects supporting the development and evaluation of assistive technology for cognition and the design of tools to promote feasible, valid client-centered goal setting.

Session Description & Objectives

This lecture examines trends in the field of cognitive rehabilitation over the preceding decades. The goal is for participants to reflect on what developments have been impactful in the field in order to reinforce their commitment to furthering these practices in their own work with those affected by brain injury. Participants will be able to: list the five major developments in cognitive rehabilitation; describe why each of these developments has been revolutionary; and give an example of how each development has furthered the field of cognitive rehabilitation.

About the Mitch Rosenthal Memorial Lecture

In 2008, the Mitchell Rosenthal Memorial Lecture first debuted to honor the major contributions of the late Dr. Rosenthal to the traumatic brain injury rehabilitation field. Besides his enormous contributions to the field, he was the primary organizer of the original Williamsburg Conference. Each year, the memorial lecture presenter is chosen based on professional accomplishments and personal qualities.

Thank you to our Lecture Sponsor



Tree of life provides post-acute, community-based, transitional neurorehabilitation and long-term supported living services for persons with acquired brain injury (ABI). Visit **tree-of-life.com** for more information.



Workshops

10:30 a.m. - 12:30 p.m.

Neurobehavioral Workshop Gordon J. Horn, Ph.D. Blue Ridge Ballroom

Coming soon

Session Description & Objectives

Coming soon

Optimizing Outcomes in Cognitive Rehabilitation Using Person-Centered Goal Setting McKay Moore Sohlberg, Ph.D., CCC-SLP Blue Ridge Ballroom

See previous page for Dr. Sohlberg's full bio

Session Description & Objectives

This workshop seeks to provide participants with concrete tools to engage in collaborative interviewing that leads to valid and reliable rehabilitation goals that are meaningful to patients. The interview process, construction of goal attainment scaling, and development of measurement plans will be reviewed. Participants will be able to: describe key components of collaborative interviewing; identify the cognitive domains, functional context, and measurement plans that correspond to client centered goals; construct person-centered goal hierarchies that meet SMARTED criteria; and describe pitfalls and possible solutions for challenges in collaborative goal setting.



Engaging in Work & School Using Emerging Technology Melissa Oliver, OT

Blue Ridge Ballroom

Melissa Oliver is an Occupational Therapist (OT) and the Assistive Technology Program Coordinator at the Central Virginia VA Health Care System in Richmond, Virginia. She specializes in areas of electronic cognitive devices, adaptive computer access, learning technologies, and electronic aides to daily living. Ms. Oliver received her baccalaureate degree in Psychology and Business Administration from Mary Washington College and her Master of Science in Occupational Therapy from Shenandoah University. She has been an OT for 20 years, 14 of which have been at the VA working on the spinal cord injury service, polytrauma tranistional rehabilitation, and now in assistive technology. Ms. Oliver is a board member of the Virginia Assistive Technology Advisory Council for the Commonwealth of Virginia and the Veteran Health Administration's 3D Printing Advisory Committee.

Session Description & Objectives

Technology is ever changing and at times can be overwhelming. As clinical practitioners, the challenge is keeping up with the technology, understanding its capabilities, and determining how applicable it is for clients. Additionally, opportunities to test out the technology are not always readily available. This workshop will review the assistive technology evaluation process and ways to match technology to the clients' needs, goals, and roles, as well as provide a hands on experience with the technology presented. Participants will be able to: describe the assistive technology evaluation process; identify 2-3 ways of matching injury severity, goals, and technology; and use at least three assistive technology devices that can be applied school and/or work.



General Session

1:00 p.m. - 2:00 p.m.

Pituitary Dysfunction Following Traumatic Brain Injury Tamara L. Wexler, M.D., Ph.D. Blue Ridge Ballroom



Dr. Tamara Wexler is a Neuroendocrinologist in the Department of Rehabilitation Medicine at New York University (NYU), whose research interests center on post-TBI pituitary changes. She has served as an Attending Physician in Internal Medicine at the Massachusetts General Hospital (MGH), and as the Director of the NYU-LMC Pituitary Center. Dr. Wexler established the NYU Endocrine Registry to support clinical research, initiating cross-institute collaborations to further investigate the importance of pituitary dysfunction and its treatment, and serves as the principal investigator of NYU's TBI/Pituitary research and lead site investigator for a multisite neuroendocrine tumor study. She writes and speaks internationally on the topic of post-TBI pituitary dysfunction. Dr. Wexler received her

M.D. and Ph.D. in Neuroscience from the University of Pennsylvania. She completed her Internal Medicine residency and Endocrinology fellowship at MGH where she was part of the Neuroendocrine Unit, designed and ran national clinical trials on the impact of growth hormone, and served for 12 years on the Optimum Care Committee. While on staff at MGH, Dr. Wexler spent four years at McKinsey & Company, where she served as the Global Endocrinology Lead, and continues to consult on research and development projects. She is an elected member of the University of Pennsylvania Institute for Diabetes, Obesity, and Metabolism Leadership Council, the Endocrine Society Scientific and Educational Programs Core Committee, and the Endocrine Society Clinical Guidelines Committee.

Session Description & Objectives

While increasing attention is being paid to the health effects of brain injury, the role that pituitary dysfunction may play in patients' health after TBI remains underappreciated. Pituitary deficiencies are seen at higher rate in patients who have sustained TBI, impact health and quality of life, and, untreated, are associated with increased morbidity and mortality and they can be diagnosed and replaced. The overlap in symptoms seen in pituitary deficiencies and symptoms seen following TBI, and the potential clinical benefit of identifying hypopituitarism, make it particularly important to be aware of patterns that may suggest pituitary dysfunction. Given the reported incidence and the potential sequelae of pituitary deficiencies, pituitary axes should be evaluated in TBI patients with signs or symptoms suggestive of dysfunction, with deficiencies replaced as appropriate. This talk will review the current understanding of pituitary dysfunction following TBI, the clinical relevance of pituitary axes, and a practical approach to clinical care. Participants will be able to: recognize signs and symptoms of pituitary deficiencies; identify indicators for pituitary testing of patients after TBI; and gain insight into the importance of pituitary hormones, as well as how to evaluate and treat deficiencies.



2:00 p.m. - 3:15 p.m.

Improving Resilience after Brain Injury for the Individual, the Family, and the Couple Kristin Graham, Ph.D., CRC, Ana Mills, Psy.D. & Jeffery S. Kreutzer, Ph.D., ABPP, FACRM Blue Ridge Ballroom

Dr. Kristin Graham is an Assistant Professor in the Department of Physical Medicine and Rehabilitation (PM&R) at Virginia Commonwealth University (VCU). She earned her Master's in Rehabilitation Counseling and doctoral degree in Rehabilitation Science from the University of Pittsburgh. Dr. Graham has over 10 years of clinical and research experience related to disability and rehabilitation, with a special focus on acquired and traumatic brain injury. Her research interests include the use of novel assessment approaches combined with smartphone technology to understand rehabilitation outcomes such as community participation after TBI. Dr. Ana Mills is a licensed Clinical Psychologist and Assistant Professor in the Department of PM&R at VCU Medical Center in Richmond, Virginia. She specializes in neuropsychological evaluation and psychotherapy for individuals with acquired neurological disorders, with specific emphasis on evaluation and treatment of traumatic brain injury. Dr. Mills' research activities include resilience after brain injury and cognitive health in aging. She has authored a number of articles, book chapters, and presentations on neuropsychology, brain injury, and rehabilitation. Additionally, she is a community support group facilitator for the Brain Injury Association of Virginia and a journal referee for the international research journals Brain Injury and the Journal of Neurotrauma. Dr. Jeffrey Kreutzer is a Professor of PM&R at VCU Medical Center. Dr. Kreutzer is a Neuropsychologist and family therapist with more than three decades of experience developing, providing, and evaluating brain injury services. He serves as Director of Virginia's federally designated Traumatic Brain Injury Model System and coordinates the VCU Health System outpatient services for families and persons with brain injury. He has published more than 170 peer-reviewed papers and is the primary developer of the Brain Injury Family Intervention, an empirically based education, skill building, and psychotherapeutic program for families.

Session Description & Objectives

This session will describe and present evidence of efficacy for three interventions designed to address post-TBI needs, concerns, and challenges for individuals, families, and romantic partners. The interventions emphasize education, skill building, and psychological support. The Resilience and Adjustment Intervention (RAI) was designed to facilitate resilience and adjustment for the survivor. The Brain Injury Family Intervention (BIFI) is a comprehensive, whole-family intervention designed to fill the complex needs of families after brain injury. The Therapeutic Couples Intervention (TCI) was developed to improve relationship quality after brain injury for both the survivor and their romantic partner. Presenters will discuss the need for evidence-based interventions after brain injury and the importance of facilitating reliance and adjustment for all those impacted. All three interventions have been rigorously investigated and the results of those investigations will be presented. Participants will be able to: describe the importance of improving resilience and adjustment after brain injury; identify the basic principles and practice of the RAI, BIFI, and TCI; and understand the importance of evidence-based intervention.



Understanding and Changing Problem Behaviors After TBI Thomas Novack, Ph.D. Blue Ridge Ballroom

Dr. Thomas Novack is Board Certified in the area of Clinical Neuropsychology and has served as an examiner for the board. He received his Ph.D. in Clinical Psychology from Memphis State University. He also has an M.A. degree in Experimental Psychology from Wake Forest University and a B.A. in Psychology from the College of William & Mary. Dr. Novack is a retired Professor of Physical Medicine & Rehabilitation at the University of Alabama at Birmingham (UAB). He has practiced neuropsychology at the Spain Rehabilitation Center since 1985. Most of his clinical practice involves the assessment and treatment of people with traumatic brain injury. Dr. Novack has published extensively on the topic of traumatic brain injury in professional journals. He served as Project Director for the UAB TBI Model System program continuously for 20 years. He is a Fellow in the Divisions of Neuropsychology and Rehabilitation Psychology of the American Psychological Association (APA), as well as the National Academy of Neuropsychology. Dr. Novack was presented with the James Garrett Early Career Award in 1995 and the Roger Barker Lifetime Achievement Award in Rehabilitation Research in 2015, both sponsored by the Division of Rehabilitation Psychology of the APA.

Session Description & Objectives

This presentation will focus on defining problem behaviors after TBI and how to intervene to promote change by application of established methods of behavioral management. This will be a "down-to-earth" talk about how to deal with everyday situations after a moderate-severe TBI. Participants will be able to: assist in defining "problem behaviors"; introduce the A-B-C of behavioral intervention; and discuss everyday applications of behavioral interventions.

Traumatic Brain Injury and Aging Mark Ashley, SC.D., CCC-SLP, CCM, CBIST Blue Ridge Ballroom

Dr. Mark Ashley is the Founder and CEO of Centre for Neuro Skills, which has operated postacute brain injury rehabilitation programs in Bakersfield, Dallas, Fort Worth, Houston, Los Angeles, and San Francisco since 1980. Dr. Ashley received his Master's Degree in Speech Pathology and a Doctorate of Science from Southern Illinois University. In 2011, Dr. Ashley established the CNS Clinical Research and Education Foundation, a non-profit research organization. He served on the Board of Directors of the Brain Injury Association of America (BIAA) for 18 years. Dr. Ashley's work has been published in many professional and research publications, and he has written four books. He has also published numerous research papers in peer-reviewed journals.

Session Description & Objectives

This course reviews pathoanatomical and pathophysiological changes after brain injury that contribute to the pathogenesis of neurodegenerative disease. Similarly, the course reviews these processes associated with normal aging and then discusses the additive effects of TBI and aging in the pathogenesis of neurodegenerative disease. Finally, the course provides insights into mitigation of the confluence of aging and TBI. The participant will be able to identify: pathological anatomic and physiologic changes and their impact on neurodegenerative disease after brain injury; the contribution of genetic and epigenetic factors to neurodegenerative disease after brain injury; pathological anatomic and physiologic changes that accompany normal aging; and the additive impact of brain injury and aging in neurodegenerative disease.



3:30 p.m. - 4:45 p.m.

Family Strong: Strength Based Parenting after Brain Injury Carolyn Hawley Ph.D., C.R.C. & Amy Armstrong, Ph.D., C.R.C Blue Ridge Ballroom

Dr. Carolyn Hawley is an Associate Professor in the Department of Rehabilitation Counseling, School of Allied Health Professions, at Virginia Commonwealth University (VCU). She has over a decade of experience related to counseling, training, research, and education in employment and community service needs of individuals with disabilities. She has worked in programs specializing in addiction and traumatic brain injury rehabilitation. She obtained her M.S. in Rehabilitation Counseling at the University of Wisconsin Milwaukee; and her Ph.D., at VCU. **Dr. Amy Armstrong** has over 35 years experience developing and offering national personnel training regarding disability, employment, well-being, and leadership. Her employment experiences include direct service and leadership.

Session Description & Objectives

Being a parent is one of the most rewarding experiences of life, however, it can also be one of the most challenging. Should a parent experience a traumatic brain injury, additional challenges related to the quality of family relationships and well-being may be present. Learning how to develop positive relationships including communication, problem-solving, and raising children who thrive as adults are goals that every family can grow towards. *Enhancing Parenting Skills (EPS) of Civilians and Veterans with Traumatic Brain Injury and their Non-injured Partners: A Service-Based Program* is a project funded by the Virginia Commonwealth Neurotrauma Initiative and offered by VCU's Departments of Rehabilitation Counseling and Physical Medicine and Rehabilitation. The goal of EPS is to enhance the parenting capability of Virginia's civilians and veterans with TBI and their non-injured partners. Participants will be able to: identify strategies to address the challenges often experienced by parents with TBI; be familiar with positive and strength based parenting to enhance family functioning; and be familiar with the research associated with strengthening families.

Functional Neurologic Symptom Disorders and TBI Nathan Zasler, M.D., FAAPM&R, FACRM, FAADEP, DAAPM & Woodford A. Beach, Ph.D., CCC-SLP Blue Ridge Ballroom

Dr. Nathan Zasler is the CEO and Medical Director of the Concussion Care, as well as Tree of Life Services, Inc. in Richmond, Virginia. He is Board Certified in Physical Medicine & Rehabilitation (PM&R) and subspecialty Board Certified in Brain Injury Medicine. He is an affiliate professor in the Department of PM&R at Virginia Commonwealth University (VCU), and an adjunct associate professor in the PM&R Department at the University of Virginia (UVA). Dr. Zasler has contributed substantively to his field over his 30 year career relative to disability advocacy, lay and professional education, support for survivors of ABI and their families, and research and dissemination. **Dr. Woodford A. Beach** has practiced speech-language pathology since 1983. Specializing in neurogenic communication disorders, he has been with the VCU Health System since 1987. He received his bachelor's degree from Cornell University in 1975 in linguistics, his Master's degree from West Virginia University in 1982 in speech-language pathology, and his doctorate from the University of Chicago in 2002 in linguistics. Most of Dr. Beach's practice has been as a clinician with the Neurology and Neurosurgery Services, providing both inpatient and outpatient care. He has conducted research into language and epilepsy including brain mapping. He participated in the development of a concussion screening program at VCU.



Session Description & Objectives

Coming soon

Creation of a Transdisciplinary Clinical Practice Guideline for Inpatient Rehabilitation for Persons' Status-Post Traumatic Brain Injury Amber Walter PT, DPT NCS, Elisabeth Drake & Brie Kilmartin Blue Ridge Ballroom

Amber Walter led a team at at Hanover Neuro Center to implement a clinical practice guideline for use of advanced technology for gait recovery at Sheltering Arms and is passionate about recovery in people with neurologic injury or illness. She became a board-certified Neurologic Clinical Specialist in 2012, is a credentialed clinical instructor, and a neurologic physical therapy residency mentor. **Elisabeth Drake** is a Recreation Therapist at Sheltering Arms Institute (SAI). **Brie Kilmartin** is the Program Manager for the Brain Injury Program at the Sheltering Arms Institute. She is a Recreation Therapist by trade and has worked in inpatient rehab, long-term care, and home health settings. Brie is a graduate of Old Dominion University. She is the current President of the Virginia State Therapeutic Recreation Association and has served on the board to connect regions across the state with access to necessary resources to advance recreation therapy practices.

Session Description & Objectives

The presentation will begin with an overview of clinical practice guidelines and continue with discussing ADAPTE, a method that can be used to adapt existing guidelines to local context. The main goal of the session is to see how professionals can synthesize evidence to provide best care for patients with TBI even when many guidelines may not exist. The process utilized for SAI will be described. The process engages managers, clinicians, and clinician-scientists of many disciplines to work together to develop guidelines that help standardize care and improve outcomes. Participants will be encouraged to engage in the session by reflecting on gaps in rehabilitation for people with spinal chord injuries and the presenters will discuss possible solutions.



Speakers & Sessions Friday, May 1

General Session 9:00 a.m. - 10:00 a.m.

Neurophysiological Optimization in Disease Management Following Traumatic Brain Injury Mark J. Ashley, SC.D., CCC-SLP, CCM, CBIST Blue Ridge Ballroom



Dr. Mark Ashley is the Founder and CEO of Centre for Neuro Skills, which has operated postacute brain injury rehabilitation programs in Bakersfield, Dallas, Fort Worth, Houston, Los Angeles, and San Francisco since 1980. Dr. Ashley received his Master's Degree in Speech Pathology and a Doctorate of Science from Southern Illinois University. In 2011, Dr. Ashley established the CNS Clinical Research and Education Foundation, a non-profit research organization. He served on the Board of Directors of the Brain Injury Association of America (BIAA) for 18 years. Dr. Ashley's work has been published in many professional and research publications, and he has written four books. He has also published numerous research papers in peerreviewed journals.

Session Description & Objectives

During and after a brain injury, a multitude of pathoanatomical and pathophysiological changes occur in the brain. Clinical approaches seek to restore function on a recovering system, yet, most clinical approaches ignore the consequences of both alteration of the brain's basic anatomy and altered metabolic state. This course examines the breadth of anatomic change after TBI along with the pathophysiologic consequences with a view toward mitigating the degenerative aspects of both. Further, this course examines the role of neuroprotection, cell therapies, neuroactivators, and growth promoters in treatment. Finally, the course discusses trophic factor, plasticity, metabolic, endocrine, neurotransmitter and other strategies for inclusion in short and long-term treatment after TBI. The participant will be able to identify: a broad array of pathoanatomic and pathophysiologic consequences of TBI; interactions between the CNS, endocrine and immune systems and how these interactions may bear on disease development and progression following injury to the CNS; and potential therapeutic avenues and strategies for health surveillance, treatment and mitigation of disease processes following injury to the CNS.



Ethics Session

10:30 a.m. - 12:00 p.m.

Heading Forward Ethically: Ethical Decision-Making and Brain Injury Rehabilitation Christine A. Reid, Ph.D., CRC, CLCP Blue Ridge Ballroom



Dr. Christine Reid is a Professor of Rehabilitation Counseling at Virginia Commonwealth University (VCU) in Richmond, Virginia. She teaches courses, including those focused on research, evaluation, life care planning, and multicultural counseling for the Rehabilitation Counseling Master's degree and Health-Related Sciences Ph.D. programs at VCU, and has been the project director for multiple federal grants. She has over 30 years of experience in rehabilitation counseling education, research, and professional practice. Her record includes more than 90 publications and over 200 professional presentations for regional, national, and international audiences. She has served on national boards such as the Commission on Rehabilitation Counselor Certification and the Council on Rehabilitation

Education. Dr. Reid's private practice includes life-care planning and vocational analysis, as well as consultation to develop and implement rehabilitation research, education, and certification programs.

Session Description & Objectives

What kinds of ethical challenges might rehabilitation practitioners working with people who have brain injuries face? How can those practitioners resolve such dilemmas or problems in an ethical manner? What kinds of resources are available to assist them with this process? What kind of framework can guide them in thinking through the process, instead of jumping immediately to hasty conclusions? This interactive session will include attention to a concise ethical decision-making model and relevant resources (including codes of ethics, using the Code of Professional Ethics for Rehabilitation Counselors as an example) to discuss case study examples. Participants will be able to: describe examples of ethical challenges that could be faced by practitioners working with people who have brain injuries; identify specific ethical guidelines and resources that may be helpful in resolving such challenges; and apply a specific ethical decision-making model to case studies involving individuals who have brain injuries.



3:30 p.m. - 4:45 p.m.

Unhelpful, and Sometimes Harmful: Stigma Enacted by Healthcare Providers and Psychotherapists Against People with Brain Injury and their Families Angela Adler, Ph.D. Student

Blue Ridge Ballroom

Angela Adler, M.A., is a Robert Wood Johnson Foundation Health Policy Research Scholar completing the third year of her Ph.D. in Sociology at the University of Nebraska-Lincoln. For her dissertation, Ms. Adler is conducting email-facilitated interviews with couples in which at least one person has a brain injury. The dissertation examines the stigma experiences of people with brain injury and their romantic partners, and factors which improve relationship quality for these couples. Through the Robert Wood Johnson Foundation, Ms. Adler has been trained by policy experts in translating academic research into practical and effective policy recommendations.

Session Description & Objectives

People with brain injury and their families face unique and severe psychological and social challenges, including stigma. Stigma against brain injury can be enacted inadvertently by healthcare providers and psychotherapists against people with brain injury and their family members. Sociological research shows this can prevent treatment efficacy, and even cause harm. Sociological literature on provider-based stigma will be presented. Preliminary data from an ongoing study about provider-based stigma, brain injury, and families will be presented. Drawing on training from the Robert Wood Johnson Foundation Health Policy Research Scholars program, recommendations will be made which practitioners and professional organizations can use to immediately mitigate harm to people with brain injury and their families. Participants will be able to: describe sociological literature on stigma enacted by healthcare providers and its effects on treatment; present preliminary data on provider stigma and its effects on people with brain injury and their family members; and make recommendations to immediately mitigate harm to families affected by brain injury.

Cognitive Re-training: Restoration vs. Compensation for Enhancing Functionality Ramaswamy Kavitha Perumparaichallai, Ph.D. & Erin Piper, Psy.D. Blue Ridge Ballroom

Dr. Kavitha Perumparaichallai is a Neuropsychologist in the Center for Transitional Neuro-Rehabilitation at Barrow Neurological Institute at Dignity Health St. Joseph's Hospital and Medical Center in Phoenix, Arizona. **Dr. Erin Piper** is a Neuropsychologist in the Center for Transitional Neuro-Rehabilitation at Barrow Neurological Institute at Dignity Health St. Joseph's Hospital and Medical Center in Phoenix, Arizona.

Session Description & Objectives

Cognitive retraining has remained a controversial subject within the neurorehabilitation community among clinicians, physicians, and health maintenance organizations. The Center for Transitional Neuro-Rehabilitation, a holistic milieu outpatient vocational re-entry program for acquired brain injured patients, has manualized a cognitive retraining protocol aimed at embedding compensation training into its curriculum and importantly, addressing patient's development of awareness, acceptance, and realism in the context of their ongoing neurological recoveries. The presentation will address the crucial involvement of neuropsychologists and rehabilitation psychologists in the cognitive retraining process. Case examples regarding how cognitive retraining served as a primer for patients' success in the vocational setting will be outlined, as well as support for hands-on, compensation-based cognitive retraining to facilitate optimal functional improvements.



Managing Vestibular Symptoms after Concussion in the Pediatric Population Ryan Lockwood, MS, PT, CSCS & Patricia M. Stevens, OT/L Blue Ridge Ballroom

Ryan Lockwood is a Physical Therapist and clinic manager at Children's Hospital of Richmond (CHoR) at Virginia Commonwealth Virginia (VCU), Fredericksburg Therapy Center. He is a Certified Strength and Conditioning Specialist from the National Strength and Conditioning Association and has also completed certification in Pediatric Vestibular Rehab Competency from the American Physical Therapy Association. Ryan graduated from Ithaca College and has provided pediatric therapy services for over 20 years in outpatient pediatrics. Ryan was instrumental in developing the multi-disciplinary concussion program at CHoR, which has been in place since 2011. **Patricia Stevens** is an Occupational Therapist and Clinic Manager at CHoR at VCU, Bon Air Therapy Center. She is a graduate of Elizabethtown College and has provided pediatric therapy services for over 25 years in outpatient pediatrics. Patricia is also a leader of the core team for the development of a multi-disciplinary concussion team at CHoR. Patricia has worked closely with the physicians, therapists, nurses, and educators in the clinic setting, as well as in active treatment programs. She has completed advanced training in Vestibular Rehab through various national conferences and completed Certified Brain Injury Specialist training in 2015.

Session Description & Objectives

The treatment of pediatric concussion is an unfortunate continuing trend in the healthcare setting. Pediatric patients sustain concussions and mild traumatic brain injuries from various sources and have varying paths of recovery. Literature continues to evolve in the discussion of pediatric recovery with respect to gender, age, mechanism of injury, symptoms, cognitive and physical performance. Vestibular dysfunction following concussion and mTBI can significantly impact the quality of life across the pediatric age span. Experience and knowledge of clinical assessment of the vestibular system and developmental frames of reference is critical to establishing a successful intervention plan. Competent pediatric occupational and physical therapists can provide intervention in the office and individualized home program for at home use to reduce symptoms, improve quality of life, and reduce impact on self-care, leisure, and academic pursuits. Participants will be able to: gain clinical pearls regarding pediatric vestibular assessment for office visit exam and appreciate developmental considerations in the treatment of pediatric mild TBI.



General Session

2:45 p.m. - 3:45 p.m.

Return to Driving Following Moderate-Severe TBI: Who, When, and Why Thomas Novack, Ph.D. Blue Ridge Ballroom



Dr. Thomas Novack is Board Certified in the area of Clinical Neuropsychology and has served as an examiner for the board. He received his Ph.D. in Clinical Psychology from Memphis State University. He also has an M.A. degree in Experimental Psychology from Wake Forest University and a B.A. in Psychology from the College of William & Mary. Dr. Novack is a retired Professor of Physical Medicine & Rehabilitation at the University of Alabama at Birmingham (UAB). He has practiced neuropsychology at the Spain Rehabilitation Center since 1985. Most of his clinical practice involves the assessment and treatment of people with traumatic brain injury. He has published extensively on the topic of traumatic brain injury in professional journals. He served as Project Director for the UAB TBI Model System program continuously for 20 years. He is a Fellow in the Divisions of

Neuropsychology and Rehabilitation Psychology of the American Psychological Association (APA), as well as the National Academy of Neuropsychology. He was presented with the James Garrett Early Career Award in 1995 and the Roger Barker Lifetime Achievement Award in Rehabilitation Research in 2015, both sponsored by the Division of Rehabilitation Psychology of the APA.

Session Description & Objectives

Return to driving is a major focus for those experiencing moderate-severe TBI and health care practitioners due to the potential for increased independence, including employment. There is insufficient information to adequately inform practitioners about who returns to driving, when it occurs, driving circumstances, or risks involved as they advise those who experience TBI. Eight TBI Model System centers joined to collect information about return to driving, completing phone surveys with 706 enrollees in the program ranging from 1 year to 30 years after injury. Participants will be able to: describe the effects of age on return to driving after TBI and the challenges of research regarding return to driving following TBI.



3:30 p.m. - 4:45 p.m.

Collaborating with Families to Manage Sequelae After Brain Injury Erin Sesemann Ph.D., LMFT, CBIS & Natalie Richardson, MS Blue Ridge Ballroom

Dr. Erin Sesemann is a licensed marriage and family therapist and certified brain injury specialist for Vidant Medical Center's Inpatient Rehabilitation Center located in Greenville, North Carolina. Her research interests include factors that promote adaptive biopsychosocial-spiritual coping and adjustment for families with physical injuries, burnout, and healthcare employees' health and well-being. Her clinical experience includes working with families in community clinics, private practice, primary care clinics, and hospital settings. **Natalie Richardson** is a doctoral candidate in the Medical Family Therapy graduate program at East Carolina University. She is currently completing her pre-doctoral fellowship at Vidant Medical Center's Inpatient Rehabilitation Center. Her primary research focuses on the biopsychosocial and spiritual impact of morally injurious experiences on military populations. Her clinical interests consist of helping individuals, couples, and families navigate grief and healing processes after significant losses and traumas, including the ambiguous losses associated with life changing physical injuries.

Session Description & Objectives

This presentation will introduce family functioning and brain injuries with an exploration into attendees' experiences with brain injury. A broad introduction of the science behind family functioning and management of psychosocial changes after brain injury will be provided, followed by an overview of the specific family dynamics associated with recovery outcomes including biopsychosocial and relational implications for healthcare providers. Presenters will incorporate their clinical experiences on TBI and stroke teams. A presentation of data regarding reasons family therapy was consulted and case examples will be used to illustrate concepts. Participants will be directed to engage in small groups and experiential activities. The presentation will introduce communication strategies and interventions to promote constructive engagement of family members. Participants will be able to: describe the influence of family dynamics and family well-being on the management of sequelae after brain injury; identify three strategies or interventions to utilize when collaborating with families; and recognize how evidence-based screeners and assessments for family functioning can be incorporated into rehabilitation assessment.

Integrative Cognitive Rehabilitation and Psychotherapy for Brain Injury with Co-Occurring Issues: An Overview Mark Pedrotty, Ph.D.

Blue Ridge Ballroom

Dr. Mark Pedrotty graduated from Loyola University of Chicago and completed his internship at the University of Texas Health Sciences Center at San Antonio. After several years working as a child clinical psychologist in San Antonio, he retrained as a pediatric rehabilitation psychologist at Carrie Tingley Hospital (CTH) in Albuquerque, New Mexico. He is a professor in Pediatrics in the division of Physical Medicine and Rehabilitation at Uiversity of New Mexico (UNM)-HSC. For over 20 years he has worked at CTH-UNM, providing inpatient and outpatient clinical services and teaching at the medical school and conferences. In response to limited services for people living with brain injuries and co-occurring conditions he developed the integrative cognitive rehabilitation psychotherapy. He is involved in educating health professionals in providing appropriate care of survivors of intimate partner violence who have suffered a brain injury.



Session Description & Objectives

Brain injuries can result in complex treatment needs. Psychotherapists can provide treatment for cognitive, psychosocial, and substance use issues within an integrative model of care that applies best practices. Participants will be introduced to the integrative cognitive rehabilitation psychotherapy model of care that includes a developmental metacognitive approach, 7 levels of cognitive functioning to assess and treat, and 8 types of interventions to apply over the course of 4 stages of therapy. Motivational interviewing is a primary therapeutic tool used to help clients develop their readiness to change and engage in specific tasks that are related to stages of care. The psychotherapist uses best practices to develop awareness and insight in moving from surviving, to developing skills and compensatory strategies, to generalizing those skills in their environment and then ending therapy. Strategies to treat cultural and ethical issues and crises that occur will be discussed.

Brain Injury Clubhouses and their Effects on Neurobehavioral Functioning and Participation: Results from a Landmark Three-Year Research Study on ABI Clubhouses Ronald T. Seel, Ph.D., FACRM, Jason Young, MSW & Coleen McKay M.A., C.A.G.S. Blue Ridge Ballroom

Dr. Ronald Seel is the Executive Director of the Center for Rehabilitation Science and Engineering at the Virginia Commonwealth University (VCU) School of Medicine. His primary research interests are evidencebased practice and self-directed approaches to independent living for people with disabilities. Dr. Seel chairs the American Congress of Rehabilitation Medicine (ACRM) Evidence and Practice Committee. Formerly, Dr. Seel was Executive Director of the Southeastern Parkinson's Disease Research Education and Clinical Center and Associate Director of Research for the Defense and Veterans Brain Injury Center at the McGuire VAMC in Richmond, Virginia. He also served as the O. Wayne Rollins Director of Brain Injury Research at Shepherd Center and as a board member for the Side by Side Brain Injury Clubhouse. Ron earned a B.A. in Government at the College of William and Mary. He returned to graduate school at VCU and completed his M.S. and Ph.D. in Counseling Psychology. Jason Young is the Executive Director of Community Brain Injury Services, a Richmond non-profit that operates two Clubhouse programs among its array of community based services for persons with brain injury. Jason has 20 years experience leading aquired brain injury (ABI) clubhouses and has presented at a number of state and national conferences on the ABI Clubhouse model and is the principal investigator for this study. Colleen E. McKay is an Assistant Professor and the Director of the Program for Clubhouse Research at the University of Massachusetts Medical School. She has a background in rehabilitation counseling and over thirty years of experience with the Clubhouse programs. Her efforts have resulted in peer-reviewed journal articles, manuals and toolkits on a variety of specialized interests areas with respect to the Clubhouse model. She is a co-investigator on the Evaluating Brain Injury Clubhouses and their Effects on Neurobehavioral Functioning and Participation project.

Session Description & Objectives

ABI Clubhouses are innovative community-based rehabilitative programs for adult survivors of brain injury. ABI Clubhouses facilitate increased community re-entry, the rebuilding of self-esteem and social relationships, and the skill acquisition required for meaningful and productive lives. A landmark research study on the ABI Clubhouse model featuring 8 Brain Injury Clubhouse programs participated in this project. This included 5 Virginia-based clubhouses and clubhouses based in Georgia, Pennsylvania, and Florida. ABI Clubhouse characteristics were studied using the Clubhouse Profile Questionnaire (CPQ), while impacts on program participants were measured with a prospective, a pre-post study design was used in which members were evaluated within 2 weeks of service initiation and again 6-9 months later. Results from this 3-year research



project and implications on the role of ABI Clubhouses as part of our community based service fabric will be discussed. Participants will be able to: describe research evidence on brain injury Clubhouse services on members participation and physical and mental health outcome; identify best practices and characteristics of successful ABI Clubhouse model; and provide guidance to policy makers and practitioners on costs savings, program sustainability and individual and community outcomes.