

# Best Practices for Return to Work after Brain Injury



October 13, 2017  
Jean Capler, MSW, LCSW

# Learning Objectives

- Discuss why use a “Best Practices Model” when helping individuals with acquired brain Injury return to work or school
- Discuss “Best Practices” team member’s roles and specialty areas
- Learn how to implement the Best Practices Model with individuals with acquired brain injury

# Brain Injury, “The Silent Epidemic”

- The term “Silent Epidemic” is used to characterize the incidence of brain injury worldwide, in part because many cases are not recognized and are, therefore, excluded from official statistics
- You typically can’t “see” the disability after brain injury (that is why hundreds of different tests have been developed).
- Most of the time the client isn’t aware of their disability, and therefore, they cannot report it
- Medical records are not likely to provide the information necessary to determine current cognitive, behavioral and physical deficits and strengths or provide recommendations.
- Every brain injury is unique. Key is “Who’s brain is the injury in???”

# Brain Injury Specialized – The Resource Facilitation Team

- Indiana VRS Counselors – Brain Injury Specialists
- Resource Facilitators
- Rehabilitation Neuropsychologist
- Clinical Manager, Brain Injury OTR
- Local Support Network Leader
- External Supports: Employment Specialists, Education, Mental Health, Transportation Services, Therapies, etc.

# Resource Facilitation- Team Members and Roles

- **VR Counselor**

- Send participant to Resource Facilitation for intake with Resource Facilitator and neuropsychologist for NeuroVocational Evaluation.
- Participate in NVE Staffing and assist to determine services and resources needed for client to be successful.
- Develop IPE specific to participant's needs and with input from client and RF Team.
- Provide services listed on IPE.
- Participate in any RF monthly team conferences held. Open and regular communication with RF team.

# Resource Facilitation- Roles cont.

- Neuropsychologist:
  - Oversees Resource Facilitation team.
  - Provides NeuroVocational Evaluation (NVE) to participant
  - Reviews and explains NVE results.
  - Gives suggestions and recommendations of therapies and resources to overcome barriers and lead to vocational success.
  - Development and oversight of implementation of treatment plan for participant.
  - Provides clinical guidance and mentorship to RF Team.

# Resource Facilitation- Roles cont.

- **Resource Facilitator**
  - Helps the individual identify, obtain, and navigate needed instrumental (housing, financial, medical, transportation, support groups, social, rehabilitation services and more), brain injury specific, community and vocational supports and services specific to the person.
  - Ensures collaboration, integration, and coordination occurs between providers and community based resources. Communication linkage between client/family, VR BI Specialist, RHI team, providers, state agency, BIAI support group, and more.
  - Serves as an advocate and models positive advocacy for client and family
  - Offers ongoing support to client/family
  - Serves as a BI educator to stakeholders involved in client's care

# Resource Facilitation- Roles cont.

- **Employment Specialist:**

- Coordinates with Resource Facilitators and other specialists to address disability related barriers to employment
- Assist consumers in obtaining and maintaining employment that is consistent with their vocational and recovery goals.
- Provide supported employment, job placement, job development, pre-employment training, vocational assessment, referral, outreach, follow-along, in-home and community-based services, and case management when necessary
- Coordinates with RHI Resource Facilitator to ensure that all on-site and off-site supports are in place until the individual is stable on the job



# Resource Facilitation- Roles cont.

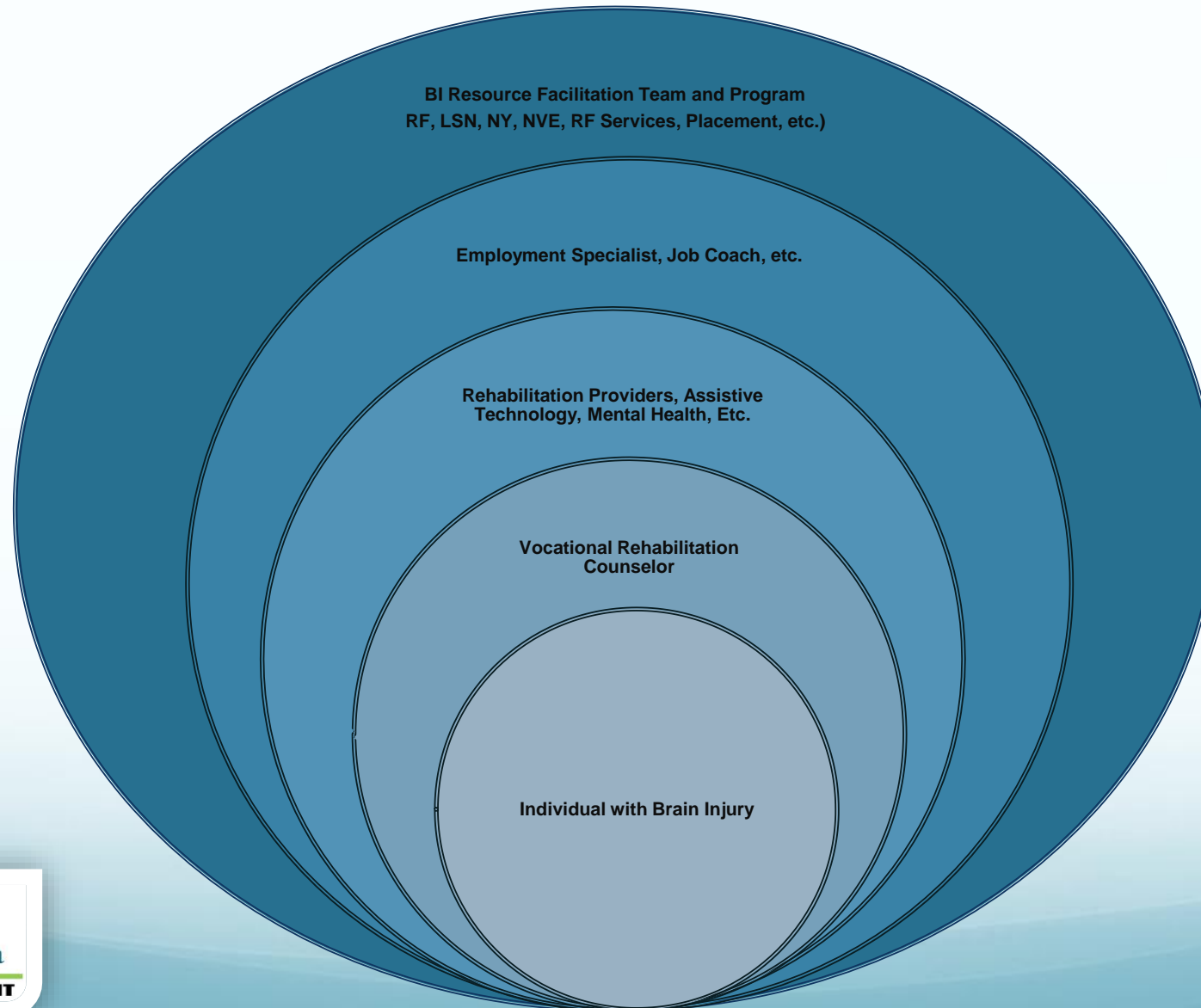
- **Local Support Network Leader:**

- Identifies community resources and natural supports appropriate to support current needs.
- Individualizes resources and service recommendations specific to client (location of client, funding, support, etc.)
- Provides brain injury specific education to the Vocational Rehabilitation Counselor, Employment Specialist, & Employer
- Provides ongoing support, consultation, & education to Employment Specialist & Employer during the 90 day period
- Serves as a BI educator to providers involved in client's care and services

# Resource Facilitation- Roles cont.

- **Other RF Team Members (specific to individualized client and individualized needs)**
  - Rehabilitation Specialists (PT, OT, ST, Vision, Vestibular, etc.)
  - Mental Health/ Substance Abuse Professionals
  - Education Professionals
  - Healthcare Providers
  - Housing Specialists
  - Support Group Leaders
  - DOC Professionals
  - Employers
  - Other providers.....

# Implementation of Best Practices



# “Essential Ingredients” for Vocational Success after Brain Injury

- Brain Injury Specialized Assistance, education, services and resources
  - Individualized to the individual’s specific brain injury and specific interest’s and needs.
- NeuroVocational Evaluation: Determines vocationally necessary services and supports and addresses vocational barriers.
  - Brain Injury Specific needs
  - Instrumental needs
- NVE Staffing provides information on
  - where to access these services
  - how to access these services (various sources of support)
- Monthly client/case staffing as needed
- Vocational Stabilization Follow-along and Services (90 Days)

# Useful Links for Brain Injury and Employment

- **Job Accomodation Network (JAN):**
  - <https://askjan.org/media/BrainInjury.html>
- **“Understanding Brain Injury: A Guide for Employers:**
  - <http://www.mayo.edu/pmts/mc1200-mc1299/mc1298.pdf>
- **An Introductory Guide for Vocational Rehabilitation Professionals:**
  - <http://biaoregon.org/docetc/Resources/voc%20rehab/Brain-Injury-Handbook-for-VR.pdf>
- **About Brain Injury:**
  - <http://www.biausa.org/about-brain-injury.htm>
- **Traumatic Brain Injury Model Systems:**
  - <http://www.msktc.org/tbi>

