BRAIN INJURY
2035TH
ANNUAL 20
CONFERENCE
BROOKLYN CENTER • MINNESOTA

Sponsored by
Allina Health
Hennepin Healthcare
Regions Hospital
MDH Minnesota Department of Health
Minnesota Stroke Association
Resiliency In The Context Of Traumatic Brain Injury: Conceptual Understandings And Implications For Rehabilitation
Emily Nalder, PhD, OT Reg (Ontario), Assistant Professor, Department of Occupational Science & Occupational Therapy, University of Toronto

This talk will first introduce the construct of resiliency and why it is relevant to study in the context of TBI. We will review what we know from the literature about resiliency in the context of TBI, and will describe two recently published conceptual models: a traumatic brain injury resiliency model and a transactional resiliency framework for rehabilitation. The former is an overall process-oriented resiliency model for the TBI context that stresses self-regulatory processes. The latter focuses on adaptive self-capacities implicated in resiliency, including self-efficacy, the capacity to marshal or create resources and supports, life situation adaptability, and envisioning a positive future. Finally we will present a method that we are using to discuss/understand resiliency and what that means to individuals with TBI. Body mapping is an arts-based method of drawing and painting a visual narrative to express one’s experiences. As applied to resiliency in TBI, body mapping produces a life-sized picture by asking individuals about life following TBI, turning points that they experienced, and how they have built resiliency. Data will be presented from ABI-based body-mapping studies to demonstrate the promise of the methodology for research and potentially for advocacy work to raise awareness about living with brain injury and service/support needs.

Dr. Emily Nalder is an Assistant Professor in the Department of Occupational Science & Occupational Therapy at the University of Toronto. She holds the March of Dimes Canada Paul J.J. Martin Early Career Professorship and a Canada Research Chair (Tier 2) in Resiliency and Rehabilitation. A licensed occupational therapist in Ontario, Canada, she holds affiliate appointments with the Toronto Rehabilitation Institute and the Rotman Research Institute at Baycrest Health Sciences in Toronto. Dr. Nalder’s research has been funded by the Canadian Institutes of Health Research, Ontario Neurotrauma Foundation, Quebec Rehabilitation Research Network and the Canadian Social Sciences and Humanities Research Council. Her scholarship focuses on understanding the complex factors related to people, environments, health services, and technology that influence the community integration, and resiliency. An expert in rehabilitation science and occupational therapy, Nalder is exploring the links between participation in life situations and resiliency. Using a “life course” perspective to examine and understand how individuals adapt during life transitions, her program of work characterizes the resiliency processes at play following traumatic brain injury and that enable student mental health. At the same time, she’s developing new rehabilitation interventions that are informed by resiliency theories and that can enhance participation.
8 – 9 a.m. ................ Registration and Exhibits Open
Exhibits are open daily 8 a.m. to 3 p.m.

8:45 – 9 a.m. .......... Opening Remarks

9 – 10:30 a.m. .......... Thursday Keynote Address – see Keynote Speakers page

10:30 – 11 a.m........ Session Break – Exhibits Open

11 a.m. – 12 p.m. .... Breakout Session I

A. Communicating the Evidence: Considering Knowledge Translation and Implementation Science in the Management of Concussion

Katy O’Brien, PhD, CCC-SLP, Assistant Professor, University of Georgia

People with concussion often report receiving conflicting recommendations of care, undermining confidence in their providers. Knowledge translation addresses how research findings can be best communicated to their intended audience, while implementation science considers how such knowledge may then be implemented in a particular setting. This presentation will discuss how the two can work hand in hand to improve the care of people with concussion.

B. Marital Instability After Brain Injury: Is Divorce Inevitable?

Robert Karol, PhD, LP, ABPP-RP, CBIST, President, Karol Neuropsychological Services & Consulting

Marital instability, separation, or divorce is often discussed as inevitable following TBI. High instability statistics are frequently quoted. This presentation will discuss available data and explore how to conceptualize the issue of marital instability after TBI.

C. Mild Traumatic Brain Injury a Shared Investment in Recovery: Collaborative Efforts Among Students, Parents, Hospitals and Schools

Stacy Stickney Ferguson, MSW, LICSW, Coordinator, Pediatric Brain Injury Program, Hennepin Healthcare; Colleen M. Onstad, MSW, LICSW, Social Worker III, TBI & PM & R Clinic, Hennepin Healthcare; Kelly Bredeken, MA, Ed.S, Statewide School TBI Specialist, MN Low Incidence Projects

Upon their return to school, students with TBI require learning experiences that are brain friendly and conducive to recovery. The creation and implementation of return to school recommendations require a collaborative partnership between student, parents, hospital liaison staff and schools. This presentation will call attention to how these relationships can influence the implementation of evidence-based practice that fosters recovery and achievement.

D. The Power of Advocacy and Ice Cream

Susan Gudenkauf, Senior Director, Cloud Technical Strategy, VMware

Susan will share how a traumatic brain injury nearly took her life 24 years ago and how learning to advocate for herself gave it back. She will talk about her ongoing recovery process and how that set her up for success as an executive of a software company based in Silicon Valley.

E. Clinical Canine Teams

Elizabeth Louis, Provider Coordinator, Psychology, Courage Kenny Rehabilitation Institute

Leo has been at Courage Kenny Rehab Institute since he was 8 weeks old. His role as an ambassador for our building, especially Mental Health, is to work with our clients and make them feel welcome. My job as his handler is to make sure that he is positioned to help attain the goals that the therapist has set for the client. Together we work side by side in the office. Leo has close to 90 skills that he has learned that help when we are invited to work with Speech, OT, and PT clients.

F. Let Your Fingers Do the Clicking... And it Will Lead You to the Defense And Veterans Brain Injury Center

Jean Ingalls, OTR, Regional Education Coordinator, Defense and Veterans Brain Injury Center (DVBIC)

The Defense and Veterans Brain Injury Center is the Defense Health Agency’s Research and Development Directorate’s Traumatic Brain Injury Center of Excellence. DVBIC assists the DoD and Department of Veterans Affairs (VA) in optimizing care of service members and veterans who have sustained a TBI. If you’ve wondered about military health resources or you would like to know where to learn more about current TBI research and education, check out this presentation.

please visit www.braininjurymn.org/conference
Thursday, 12 – 2 p.m.

12 – 1 p.m. ................. Lunch

Presentation on TBI in Minnesota—2020 Updates Minnesota Department of Health

1 – 2 p.m. ................... Breakout Session II

A. Yoga and Meditation for Brain Injury: Evidence, Innovations, and Ways Forward

Alyssa Talbot, Assistant Manager, LoveYourBrain Yoga Program, LoveYourBrain Foundation

The LoveYourBrain Yoga program is an evidence-based, six-week, yoga program for people with TBI and caregivers available across North America, including Minneapolis. Research has found LoveYourBrain Yoga significantly improves quality of life, resilience, positive affect, and cognition among people with TBI. This session will describe and demonstrate the evidence-based benefits of yoga and meditation for brain injury and how to access free yoga resources.

B. Using Remote Access to Coordinate Rehabilitation Services after TBI

Thomas Bergquist, PhD, ABPP-CN, LP, ACRM, Associate Professor of Psychology, Mayo Clinic

In collaboration with Departments of Health and major health systems in the states of Minnesota, Iowa, Wisconsin, North Dakota and South Dakota, the Mayo Clinic Traumatic Brain Injury Model System Center intervened with persons with TBI and their families over three years. All available resources in an individual’s community, and available at Mayo Clinic, were used to connect to the subjects and their families, as well as to provide clinical services remotely as indicated.

C. TBI News You Can Use

Minnesota Department of Health: Mark Kinde, MPH, Health Program Manager Senior, Injury and Violence Prevention Section Manager; Jon Roesler, MS, Injury Epidemiologist Supervisor

Using multiple data sources, this presentation will describe how TBI has changed over time, specifically in terms of the age groups experiencing most injury, the occupations and activities most involved, and the regions of our state most affected. New risks for TBI will be noted and key prevention efforts highlighted. Certainly entertaining and possibly slightly provocative.

D. How to Partner and Use Collective Impact Framework to Increase Outcomes

Allison Alstrin, Project Manager, Project Got Your Back/MN Military & Veteran Exchange; Galon Miller, Veteran Advocate, MN Military & Veteran Exchange

We will use a real case to tell how our existing service programs collaborated on expanding the network of support and resources. Today, we work together on setting common goals; sharing data; inspiring mutually reinforcing activities; communicating; and addressing barriers impacting total health. Learn ideas and strategies to overcome some of your own barriers to system change as well as some creative ways to increase desired outcomes.

E. Changing the Culture of Concussions in Youth Contact Sports

CentraCare Health: Manny Ravelo, MPH, Project BrainSafe Program Coordinator; George Morris, MD, CPE, FAAFP, Sports Medicine, Vice President, Performance Excellence

A significant number of sports-related concussions go unreported. Reasons include how athletes perceive their teammates’, parents’ and/or coaches’ feelings about them reporting a concussion and missing playing time. There may, however, be a misperception between how these groups are perceived and their actual beliefs. Implementing Positive Community Norms can be used as an effective tool in changing the culture of concussions in sports.

F. The Power of Support Groups: The Benefits and Considerations for Creating or Joining a Stroke/TBI Support Group

Stephanie Henigin, MA, CCC-SLP, Speech Pathologist, Regions Hospital – HealthPartners Neuroscience Center

So often insurance coverage ends before an individual is ready for therapy to be finished. Peer-community support groups help to fill the gap and serve as educational, recreational, emotional, and social outlets for the lifelong recovery journey after a brain injury. This breakout session will discuss the benefits of support groups; facility considerations for starting a group; and overcoming group challenges to grow stroke/TBI peer-community support groups.

For more information or to register online,
Healing & Recovery: Traumatic Brain Injury

Ray Widstrand, TBI Survivor, Realtime Coordinator at Captionmax

Ray Widstrand suffered a traumatic brain injury in 2013 that he was not expected to survive. Thanks to the hard work of doctors, surgeons, and therapists he was able to make a functional recovery and lives with a TBI. Ray is a recipient of the Saint Paul Police Chief Medal of Valor and a resident of Saint Louis Park. Today, he is a working professional and volunteer with the Minnesota Brain Injury Alliance Speakers Bureau and travels around the state telling his story to raise awareness and advocate for those with traumatic brain injury.

Ray’s presentation details the impact of having a traumatic brain injury, his recovery process and the various types of therapy he went through. Ray will also talk about learning how to adapt to his situation, living with a traumatic brain injury today, and finally recognizing the organizations and people who helped him navigate life with a traumatic brain injury.
Friday, 8 a.m. – 12 p.m.

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9 – 10:30 a.m. ........... Friday Keynote Address – see Keynote Speakers page
10:30 – 11 a.m.......... Session Break – Exhibits Open
11 a.m. – 12 p.m. ...... Breakout Session I

A. Transition from Hospital to Home Following Traumatic Brain Injury
Emily Nalder, PhD, OT Reg (Ontario), Assistant Professor, University of Toronto
My doctoral research explored hospital to home transitions for individuals with TBI and their families. I will present evidence that describes lived experiences in transition for individuals and families; changes in psychosocial functioning across the first six months following discharge; and the factors that influence perceived transition success. I will conclude with implications for rehabilitation and service delivery to support hospital to home transitions and promote community integration.

B. Reflections on Ethics Across Disciplines, Part I
Robert Karol, PhD, LP, ABPP-RP, CBIST, President, Karol Neuropsychological Services & Consulting
This presentation will address the nature of ethical standards. Both aspirational and obligatory ethical variables will be discussed. It will then provide a description of these across selected disciplines. The talk will conclude with an opportunity for participants to explore ethical issues in rehabilitation case studies.

Note: this is a two-hour talk split in half. Please plan to attend both hours to submit to any organization as ethics participation.

C. This Old Brain
Mike Strand, Independent Contractor, Historic Building Services
After thirty years of recovery from a severe brain injury caused by a motor vehicle accident, Mike Strand has had to come to grips with the idea that he is no longer “getting better.” In fact, old age deficits are seemingly magnified as he anticipates an accelerated senescence. Mike discusses his search for hope and meaning amid his daily struggle to remain present.

D. Protecting the Integrity of Sports by Protecting Those who Play Sports
Mark Asanovich, Owner, Propumped, Inc.
The science of concussion is slowly evolving. However, we need to find better ways of protecting the human brain in sport. The preponderance of research and expert consensus indicates that the severity of the concussion and resulting cognitive impairment would in fact be lessened if the head, neck and surrounding cervical structures were stronger. As a former 14 year NFL Strength Coach I would like to present evidence-based neck training to mitigate sport concussion.

E. TBI Management and Beyond
Nicole St. John, OTR/L, Sr. Occupational Therapist; Elise Schultz, OTR/L, Sr. Occupational Therapist, Hennepin Healthcare
This presentation will address common challenges following mTBI with emphasis on the individual, their environment and their occupations in daily life. Roles of a multi-disciplinary team and symptom management will be addressed through an occupational therapy lens to promote continued independence with personal tasks and goals. Discussion will cover common symptoms following mTBI, strategies for energy management, screen use and multi-sensory task participation.

F. Understanding the Role of Public Health Model for Suicide Prevention
Jessi M. Faue, BS, BSN, RN, US Army Veteran, Outreach and Education Specialist for Suicide Prevention, Minneapolis VA
The VA has adapted the Public Health Model for Suicide Prevention to be able to reach veterans through touch points in their communities before a crisis occurs. Twenty veterans die by suicide each day; fourteen out of the twenty do not engage in VA care, a known protective factor. Communities need to be educated on warning signs and resources so that they can help recognize when a veteran is at risk and know what steps to take to assist. When suicide prevention is everyone’s responsibility, we can save lives.

For more information or to register online,
12 – 1 p.m. Lunch
Presentation on Resource Facilitation by Minnesota Brain Injury Alliance

1 – 2 p.m. Breakout Session II

A. Reflections on Ethics Across Disciplines, Part II
Robert Karol, PhD, LP, ABPP-RP, CBIST, President, Karol Neuropsychological Services & Consulting
This presentation will address the nature of ethical standards. Both aspirational and obligatory ethical variables will be discussed. It will then provide a description of these across selected disciplines. The talk will conclude with an opportunity for participants to explore ethical issues in rehabilitation case studies.

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B. Public Policy Updates
Jeff Nachbar, Public Policy Director, Minnesota Brain Injury Alliance
Join this session for a political update on current policy efforts at both the State and National levels. The status of the 2020 Legislative Session and current issues in the US Congress will be discussed as they pertain to the priorities of the Alliance’s advocacy efforts.

C. Sleep On It: The Role Of Sleep Hygiene In Improving Cognition After TBI
Kristen Grigsby, MOT, OTR/L, Occupational Therapist, Minneapolis VA
Optimizing sleep hygiene is a critical aspect of lifestyle management after TBI. This session will describe the relationships between TBI, sleep disturbances, cognitive performance and emotional regulation. It will review recommendations for gathering data to inform development of strategies unique to the individual. Finally, it will review sleep hygiene principles and recommendations to overcome common barriers to sustained habit change.

D. Increasing Awareness After A Brain Injury Is A Key To Independence
Courage Kenny Rehabilitation Institute: Nicole Lainhart, CBIS, Speech Language Pathologist, Community Reintegration Program Coordinator; Elizabeth Senne, CBIS, Clinical Social Worker; Linda Griffith, CBIS, Occupational Therapist; Norman Cohen, Neuropsychologist, Community Reintegration Program Clinical Director
A person’s self-awareness of cognitive and behavioral changes can be significantly impacted following a brain injury. This creates a unique challenge for their caregivers and the clinicians who work with them. This session will discuss the different levels of self-awareness; treatment approaches to improve awareness of cognitive and behavioral challenges; and ways that caregivers can help support the recovery process.

E. Aging and Brain Injury: Helping Patients and Families Navigate Lifelong Wellness
Richard J. Young, PhD, LP, Rehabilitation Psychologist, Regions Hospital Rehabilitation Center, Regions Hospital
After the initial outcomes of brain injury, many patients and their families begin to ask, “What comes next?” This presentation reviews recent literature regarding the potential impacts of brain injury across the lifespan, with attention to how these may differ from normal aging. Additionally, effective treatment and preventive efforts are discussed, as are core concepts to review with patients and families in the clinical setting.

F. Pooled Trust and ABLE Accounts - The Impacts on Accessing County Benefits
Kimberly Watson, MPA, CTFA, Sr. Director, Pooled Trust, Guardianship Options and Supported Decision Making, Lutheran Social Service of Minnesota
There is a myriad of State, Local, or Federal Benefits available to people living with a disability. We will present an overview of some of the benefit services individuals can receive in the community and the benefit eligibility requirements. Two non-benefit services, the ABLE account and The Special Needs and Supplemental Needs Trust will be discussed. All of this comes together for a better quality of life for the individual with brain injury.

please visit www.braininjurymn.org/conference
That’s a Great Haircut

Joe Oppold

After graduating in the top five percent of his class from West Point, Joe was on his way to medical school and on top of the world. Two weeks later, on the night of June 18, 1996, he was diagnosed as having a cerebral aneurysm that burst during surgery leaving his whole right side paralyzed.

Joe’s first great haircut marked the start of his push to meet the incredible academic, military, and physical rigors required of a cadet. On that night, June 18, he was about to embark on his second greatest haircut. This haircut signified the beginning of the greatest challenge of his life.

Now, more than 20 years later, he is an author of a book, motivational speaker, husband and father. Joe will share how his determination he learned at West Point along with the strength from family and friends helped him through the challenges he faced to get back to leading a fulfilling life.

His book is dedicated to all those who contributed to his recovery. This is his story. “That’s a Great Haircut!” by Joe Oppold.

Earle Brown Heritage Center Floor Plan
Thank you to our Diamond Supporters:

- Allina Health
- Hennepin Healthcare
- Regions Hospital
- Minnesota Department of Health
- Minnesota Stroke Association

Information on Presentation Handouts
Each attendee is responsible for printing handouts for each presentation attended. Before attending the conference, please view and print out session handouts by going to www.braininjurymn.org/handouts.html.

For Your Comfort
Please be responsible for your own comfort during the conference. Layering is recommended given the temperature ranges of large conference center settings.

Additional Information
Video or audio taping during the conference requires pre-approval by the Minnesota Brain Injury Alliance. If you have questions please call 612-378-2742 or 800-669-6442.

If you require a reasonable accommodation to access this conference please contact the Minnesota Brain Injury Alliance by March 16, 2020 and specify your needs.

Parking is available at the Earle Brown Heritage Center at no cost.

Lodging
A limited number of rooms have been arranged at Embassy Suites in Brooklyn Center. Registrants are responsible for their own hotel arrangements. Please mention the Minnesota Brain Injury Alliance when reserving your room. Special rates are available through March 15, 2020.

Embassy Suites
6300 Earle Brown Dr
Brooklyn Center, MN 55430
763-560-2700

You can also make your hotel reservations online at these group rates by going to www.braininjurymn.org/hotel.html.

If you have any questions, please contact the Education department by calling 612-378-2742 or 800-669-6442.
The conference is designed for physicians, psychologists, rehabilitation therapists, social workers, case managers, nurses, educators, special education directors/administrators, mental health and chemical health therapists, residential staff, policy makers, state agency personnel, as well as program administrators. All interested professionals who serve individuals living with brain injury are welcome to attend.

The purpose of this two-day professional conference is to highlight new research, trends, practice strategies and collaborative models of care. Innovative approaches and new systems of care for individuals living with brain injury will be presented through discussion, lecture, case studies and exhibits.

Continuing Education Units (CEUs)
Continuing Education Units will be available each day following the plenary session. The Alliance is accredited through the Minnesota Department of Health for CEU credits for physical therapy, occupational therapy, speech therapy and nursing. The Alliance is approved for CCMS, CRC/CRC, CDMS, and MDH continuing education credits. The Alliance is approved continuing education provider for the Minnesota Board of Social Work and the Minnesota Board of Nursing Home Administrators. Attendance at this conference can be applied to continuing education requirements for CBIS/CBIST. This conference offers a total of 5 CEUs per day.

The mission of the Minnesota Brain Injury Alliance is to raise awareness and enhance the quality of life for all people affected by brain injury.
To register for the 35th Annual Conference for Professionals in Brain Injury, please fill out the form below as you would like it to appear on your name tag. Use one form per person. Each attendee and exhibitor must fill out this registration form – no sharing of registration. Send completed forms to:
Minnesota Brain Injury Alliance
2277 Highway 36 West, Suite 200
Roseville, MN 55113

You may also fax your registration to 612-378-2789, or register online at www.braininjurymn.org/conference.

Name * ____________________________
Occupation _______________________
Organization * ____________________
Phone ____________________________
E-mail ____________________________

Preferred Mailing Address
Address: __________________________
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Billing Address
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City ______ State ______ Zip ________

* As you would like it to appear on your name tag

Payment Information

Cancellations received less than 15 days before the conference are subject to a $35 per day fee.
Registration ends on Monday, April 13, 2020 at noon. Mailed registration forms should be mailed no later than Wednesday, April 8, 2020.

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<th>Thursday, April 16</th>
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Continuing Education Units (CEUs)
Continuing Education Units (CEUs) will be available at the end of each day following the plenary session. See previous page for complete CEU descriptions.

Please check the sessions you would like to attend (choose one class per session). Attendees are responsible for printing their own handouts. Go to www.braininjurymn.org/conference for more information.

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One additional conference registration is available for exhibitors for $70 per day

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Group rates are available for groups of five (5) or more. Please contact the Minnesota Brain Injury Alliance to register at group rates. Groups need to register together.

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Special accommodations:
If you require a reasonable accommodation to access this conference, please inform us by March 20, 2020 and specify your needs.
April 16 & 17, 2020
Earle Brown Heritage Center,
Brooklyn Center, Minnesota

Keynote Presentations by:
Katy O’Brien, PhD, CCC-SLP
Emily Nalder, PhD, OT Reg (Ontario)

Plenary Presentations from Ray Widstrand and Joe Oppold

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