

43rd ANNUAL BRAIN INJURY CONFERENCE MARCH 26 & 27, 2025 - REGISTRATION BROCHURE



Welcome, Pricing, Membership

Thank you for your interest in BIA-MA's 43rd Annual Brain Injury Conference! The Annual Brain Injury Conference provides a platform for all individuals affected by brain injury to learn about new developments in the field of brain injury, including professionals, family members, caregivers, and survivors. On behalf of the Annual Conference Committee, we hope you enjoy this year's conference.

Venue:

Best Western Royal Plaza Hotel & Trade Center, 181 Boston Post Road West, Marlborough, MA 01752, 508-460-0700, www.rplazahotels.com. A block of discount rooms are available for conference attendees at \$138.92, if booked directly with the hotel by March 11, 2025. Quiet rooms are available on both days of the conference.

Registration and Pricing:

PROFESSIONAL & INDIVIDUAL		SURVIVOR & FAMILY		SURVIVOR & FAMILY SCHOLARSHIP
Early Bird Rate (by 3/7)	<u>Regular</u> <u>Rate</u>	Early Bird Rate (by 3/7)	<u>Regular</u> <u>Rate</u>	<u>Rate</u>
\$70	\$75	\$20	\$25	\$5.00
\$120	\$125	\$35	\$40	\$7.50
\$165	\$175	\$50	\$60	\$5.00
\$215	\$225	\$65	\$75	\$7.50
\$195	\$225	\$60	\$75	\$7.50
\$295	\$325	\$75	\$90	\$10.00
	\$70 \$120 \$165 \$215	Early Bird Rate (by 3/7) Regular Rate \$70 \$75 \$120 \$125 \$165 \$175 \$215 \$225	Early Bird Rate (by 3/7) Regular Rate Early Bird Rate (by 3/7) \$70 \$75 \$20 \$120 \$125 \$35 \$165 \$175 \$50 \$215 \$225 \$65	Early Bird Rate (by 3/7) Regular Rate Early Bird Rate (by 3/7) Regular Rate \$70 \$75 \$20 \$25 \$120 \$125 \$35 \$40 \$165 \$175 \$50 \$60 \$215 \$225 \$65 \$75 \$195 \$225 \$60 \$75

^{*}TO QUALIFY FOR THE DISCOUNTED MEMBERSHIP RATE, YOUR BIA-MA MEMBERSHIP MUST BE ACTIVE AS OF MARCH 26, 2025.

All registrations must be paid prior to conference attendance.

- Registration is based on a first-come, first-served basis.
- Cancellations on or before March 8th will receive a full refund. Cancellations received between March 9th and March 14th will be refunded less a 35% administrative fee. Cancellations on or after March 15th will not receive a refund.

Become a BIA-MA Member - Join (or renew) before registering for conference to get the discounted member rate! Visit <u>biama.org/annualconference</u> for more information.

Membership Level Benefits

- ALL MEMBERS: Discounts to Annual Brain Injury Conference, ABI Educational Programs, and other BIA-MA events, advocacy
 alerts, event invitations, news updates, hardcopy subscription to BIA-MA's Newsletter (*Heads Up Headlines*) and BIAA's
 magazine (*THE Challenge!*). The FAMILY/ CAREGIVER MEMBERSHIP includes these benefits for up to 4 members.
- The PROFESSIONAL PLUS MEMBERSHIP includes the above plus a subscription to *The Journal of Head Trauma Rehabilitation*.

Membership Level Pricing

- Professional Plus \$125
- Professional \$75

· Individual \$35

• Family \$50

• Brain Injury Survivor \$5

^{*}IF YOU REGISTER AT THE DISCOUNTED MEMBERSHIP RATE AND DO NOT HAVE AN ACTIVE MEMBERSHIP AS OF MARCH 26TH, WE WILL ASSUME YOU WANT TO BE A MEMBER AND WILL BILL YOU FOR THE COST OF MEMBERSHIP.

Conference Committee, Continuing Education

Thank You to our 2025 Conference Committee!

Moriah Baker, CCC-SLP, Encompass Health Braintree Rehab Hosp.

Scott Barschdorf, Berkshire County Arc

Kelly Buttiglieri, Esq., Brain Injury Association of Massachusetts

Cynthia Cardeli, Brain Injury Association of Massachusetts

Christopher Carter, PsyD, CBIST, Spaulding Rehab.

Heather Dely, MSW, Advocates

Scott Doane, Brain Injury Association of Massachusetts

Stephanie Gilbert, MS, CCC-SLP, CBIS, Community Rehab Care

Nicole Godaire, Brain Injury Association of Massachusetts

Allison May, MS, OTR/L, CBIS, Community Rehab Care

Chibueze Nwosu, CBIS, MassAbility

Ann Pike-Paris, MS, BSN, RN

Sandy Schultz, LICSW, Vinfen Corporation (chair)

Emily Silverberg, MS, CCC-SLP, BC-ANCDS, CBIS, Spaulding Rehab.

Betsy Stockwell, DDS - Northeast Regional Offices

Lisa Sullivan, MassAbility

Tim Sweeney

Amanda Tower, MassAbility

Continuing Education Credits:

For detailed information on speaker financial and non-financial relationships and disclosures, please visit:

https://biama.org/annualconference/

Grievance Policy: BIA-MA seeks to ensure equitable treatment of every person and to make every attempt to resolve grievances in a fair manner. Please submit a written grievance to education@biama.org or call 508-475-0032. Grievances will receive, to the best of our ability, corrective action to prevent further problems.

Accommodations for the Differently Abled: Individuals needing special accommodations, please contact education@biama.org or call 508-475-0032.

Target Audience: Addiction Professionals, Audiologists, Case Managers, Certified Brain Injury Specialists, Certified Brain Injury Trainers, Family Counselors, Mental Health Clinicians, Neuropsychologists, Nurses, Occupational Therapists, Physical Therapists, Psychologists, Recreation Therapists, Rehabilitation Counselors, Social Workers, Speech-Language Pathologists, and Program Directors/Managers of residential, day and other programs that serve persons with ABI.

Conference Learning Objectives: As a result of attending this conference, participants will be able to:

- 1. Recognize support resources available across the state of Massachusetts for brain injury survivors and their families, including tools to aid in recovery and rehabilitation, and demonstrate accessing those programs.
- 2. Appraise the depth and breadth of signs and symptoms of brain injury, based on current and cutting-edge science, and in turn develop both short-term and long-term treatments to enhance positive impacts on survivors and their families.
- 3. Interpret a variety of biopsychosocial factors impacting brain injury survivors and their families, including gender disparities, substance use, communication barriers, and emotional and behavioral changes, and implement appropriate communication and treatment protocols recognizing that impact.
- 4. Demonstrate a commitment to sharing information and experiences of brain injury survivors to further the education and training of professionals across a spectrum of medical and social communities.

Continuing Education Credits:

- Satisfactory Completion Requirement: A certificate of attendance will be available digitally after registration; active attendance at the entire preconference and/or conference including documented log-in and log-out times; and submission of completed evaluation within 30 calendar days. There is no partial credit offered, nor credit for individual workshops.
- It is the participant's responsibility to check with their individual state boards to verify CE credit requirements for their state and licensure.
- Non-Credit Activities: Continuing education credit and ASHA CEUs are not offered for registration, breaks, lunches, poster sessions, or networking sessions. Contact education@biama.org with questions.

This activity has been submitted for CE credit review and is pending approval. Once we receive notification of the credit approval, we will notify attendees and update this document.

• Audiologists and Speech-Language Pathologists: This pre-conference and conference are offered for up to 1.05 ASHA CEUs (Various Levels, Professional Area). ASHA CE



Massachusetts Speech-Language Hearing Association

Various Levels 1.05 ASHA CEUs (Various Levels, Professional Area). ASHA CE Provider approval and use of the Brand Block does not imply endorsement of course content, specific products, or clinical procedures.



- Addiction Professionals (NAADAC): The Brain Injury Association of Massachusetts has applied as an approved education provider for continuing education credits through NAADAC, the Association for Addiction Professionals. Approval pending.
- Case Managers: Application has been submitted for Case Managers through The Commission for Case Manager Certification to provide 4.5 continuing education credits for preconference and 6.0 continuing education credits for conference, for a total of 10.5 continuing education credits to CCMC Board Certified Case Managers (CCMs).
 - **Licensed Mental Health Counselors (LMHC):** Application for MaMHCA continuing education credits for LMHC has been submitted. Please contact education@biama.org or call 508-475 0032 for further details.
- Rehabilitation Counselors (CRC): Application for CRCC continuing education credits for CRC, CCRC, CRCCAC, and CRC-CS has been submitted. Please contact <u>education@biama.org</u> or call 508- 475-0032 for further details.

Pre-Conference Schedule: Wednesday, March 26, 2025		
10:30 a.m 11:00 a.m.	Registration (Not eligible for continuing education credit or ASHA CEUs)	
11:00 a.m 12:30 p.m.	Session A: Workshops 1-3	
12:30 p.m 12:45 p.m.	Break: Sponsor, Exhibitor, and Poster Networking (Not eligible for continuing education credit or ASHA CEUs)	
12:45 p.m 1:30 p.m.	Lunch (Not eligible for continuing education credit or ASHA CEUs)	
1:30 p.m 1:45 p.m.	Break: Sponsor, Exhibitor, and Poster Networking (Not eligible for continuing education credit or ASHA CEUs)	
1:45 p.m 3:15 p.m.	Session B: Workshops 4-6	
3:15 p.m 3:30 p.m.	Break: Sponsor, Exhibitor, and Poster Networking (Not eligible for continuing education credit or ASHA CEUs)	
3:30 p.m 5:00 p.m.	Session C: Workshops 7-9	
5:30 p.m 8:00 p.m.	Reception: Join us for a guest speaker and documentary screening with appetizers, food, and refreshments. (Not eligible for continuing education credit or ASHA CEUs)	

Session A (11:00 a.m. - 12:30 p.m.): Workshops 1-3

1. Adaptive Sport and Recreation: Benefits and Opportunities

Kathleen Salas, PT, MHA: Boston Coordinator, Spaulding Rehabilitation Adaptive Sports Center, Salem, MA; Elizabeth Dahlen, CTRS, CIFT: Cape Cod Coordinator, Spaulding Rehabilitation Adaptive Sports Center, Sandwich, MA

In this workshop, the Spaulding Adaptive Sports Centers (SASC) multi-disciplinary team describes the benefits and barriers of adaptive sport and recreation. Possibilities available to clients after brain injury will be shared, including SASC opportunities provided over the past 20 years that shift with regional trends. The power of early exposure to adaptive sport will be emphasized, including introduction to recreation during inpatient stays that build a bridge from rehabilitation to lifelong health and wellness. Client stories and testimonials will be discussed with a focus on the power of sport and community, and their impact on progress and QOL. The value of the Therapeutic Recreation "APIE" process of individualizing goals and documenting evidence-based gains will be provided. We will highlight popular sports in Eastern MA that are broadly accessible to most clients regardless of their abilities and limitations and allow time to explore a few pieces of adaptive equipment.

2. Behavior Management After Adult Acquired Brain Injury

Wendy Uelk, MS, CCC-SLP, CBIS: Speech-Language Pathologist; Emily Nicholas, MS, CCC-SLP: Speech-Language Pathologist, Advanced Clinician; Kara Sheftic, MS, CCC-SLP: Speech-Language Pathologist, Advanced Clinician; All with Spaulding Rehabilitation Hospital, Boston, MA

Changes in neurobehavioral profiles are common following various forms of acquired brain injury. It is well known that biopsychosocial factors heavily influence human behavior. In the case of adult acquired brain injury, fluctuations and exacerbations of behavioral presentations can limit acute rehabilitation and home safety. This workshop will discuss causes of behavior changes, assessment, prevention, and intervention across the continuum of care. Clinicians can expect a review of the current best practice guidelines for behavior management in the acute rehabilitation setting. Survivors and Caregivers can expect to learn tools to safely navigate challenging behaviors.

3. Grief and Loss After Stroke: A Patient Perspective

Alys Nawawi, MS, PT; Waltham, MA

Join us for an interactive overview of three models of grieving from the perspective of a former physical therapist, and new stroke survivor. Using personal anecdotes and art created during the initial fifteen months post-CVA, this presentation is about the journey through the labyrinth of stroke recovery, heading towards acceptance and thriving with discussion of losses, reactions, and personal interventions beyond the physical, and including issues in the cognitive, social, emotional, and spiritual domains of the human experience.

Session B (1:45 p.m. - 3:15 p.m.): Workshops 4-6

4. Adaptive Technology: Program Development and Implementation

Robert Goetting: Director of Adaptive Technology; Oscar Collins, M.Ed.: Training Coordinator; Both with Mental Health Association, Inc., Chicopee, MA

This workshop will discuss the operational definitions of assistive and adaptive technology, as well as the history and evolution of the field(s). The development and implementation of an assistive/adaptive technology program in a community-based human service organization supporting individuals diagnosed with acquired brain disorders will be shared. Both general and specific adaptive technology devices and implementations will be presented, and workshop attendees will have the opportunity to "test drive" some equipment. Finally, the future direction of the field will be discussed, including the use of technology such as smart watches, virtual reality and artificial intelligence.

5. Care for the Caregiver: Reflective Writing to Ease Burnout

Carolyn Roy-Bornstein, MD, FAAP: Writer-in-Residence, Lawrence Family Medicine Residency program, Newburyport, MA

Whether you are a family member caring for a loved one, or a healthcare professional providing expert treatment, caregiving is hard work and can be emotionally draining. We bear witness to the suffering of our patient or loved one every day. Our hearts need a "back door": a place to let go of whatever suffering doesn't belong to us while holding on to lessons learned and wisdom gained. A reflective writing practice can be that back door, leading to enhanced empathy, deeper self-compassion, and strengthened personal relationships. I will unpack the science behind the success of this powerful tool and offer tips and strategies to get you started on your own reflective writing journey. (This workshop includes time for 2-3 writing sessions where audience members can write reflectively to prompts I will provide. Sharing is optional but builds coherence and camaraderie.)

6. Stop, Listen, Communicate: Interprofessional Collaboration

Tracey Callahan, MS, CCC-SLP, CBIS, CLC: Speech-Language Pathologist & Executive Director, TLC Speech Therapy, South Boston, MA; Abigael Yelensky, OT, MSOT, OTR, CBIS, CNS: Occupational Therapist & Owner, New England PossibilOTs, LLC, Newton, MA

Patients and families following brain injury are often overwhelmed by the number of professionals that they are interfacing with and who are providing care. It can be difficult for families to navigate this new landscape as they are foisted into the role of a care coordinator. Interprofessional communication and collaboration are effective in improving patient satisfaction and recovery. Professionals are bound by their professional ethics to ensure communication with team members. Many families and professionals are unsure how to practically implement interprofessional collaborative practice as it relates to brain injury care and recovery. During this workshop, an SLP and OT, who specialize in brain injury, will support families and professionals to identify barriers and as well as solutions. Using case studies, workshop participants will have the opportunity to apply the concepts and approaches learned.

Session C (3:30 p.m. - 5:00 p.m.): Workshops 7-9

7. Functional Neurological Disorder: A PT and OT Approach

Nicole Mannion, MA, OTR/L: Senior Occupational Therapist, Brigham and Women's Hospital, Foxborough, MA; Briana Eagan, PT, DPT, LSVT Certified: Neurological PT, Exeter Hospital, Newburyport, MA; Michaela Smith, OTR/L, CBIS, LSVT BIG Certified: Neurological Occupational Therapist, Exeter Hospital, Greenland, NH

Functional Neurological Disorder (FND), formerly known as conversion disorder or psychogenic disorder, is a pervasive and disabling diagnosis that often requires treatment by occupational therapy practitioners (OTPs) and physical therapists (PTs). Despite the increasing prevalence and emerging research, FND is often not covered in academic coursework for OTPs and other health care professionals. This presentation will define FND, describe the current recommendations for OTP/PT assessment, treatment and identify emerging opportunities for OTPs/PTs working with clients with FND and provide examples of evaluation and treatment through a case study. This presentation will define FND, provide an in-depth description of FND symptoms, provide current, evidence-based recommendations for OTP/PT assessment/treatment, and provide recommendations for multidisciplinary treatment models for optimal success.

8. Restoring Sleep and Mental Health after ABI with Yoga Nidra

Jackie Farrell, OT, OTD, OTR, CBIS, E-RYT-200: Clinical Affiliate Program Manager, LoveYourBrain, Marlborough, MA

This engaging workshop will offer education about how sleep and mental health are impacted after ABI, and how yoga nidra guided meditation has been proven to help. Yoga nidra or 'yogic sleep' is a guided relaxation technique that shifts brain waves from beta to alpha, theta, and eventually delta frequencies to achieve emotional balance, stress reduction, and restorative sleep. Yoga nidra is an evidence-based, 10-step practice that has been shown to improve sleep, PTSD, chronic pain, and anxiety after brain injury. Together, we'll explore a range of simple and effective practices to support yourself and patients and their families in their healing journey.

9. Return to School Following Brain Injury

Katherine Barrett, MS, CCC-SLP: Speech Language Pathologist, Advanced Clinician, Spaulding Rehabilitation Hospital, Boston, MA

Following brain injury, children and young adults often present with cognitive linguistic impairments that impact their ability to return to school and fully access the curriculum. Accommodations and services exist for this population within school systems, however there is a lack of evidence to guide the transition back to school following brain injury, and children and their families often experience difficulties accessing these services. This workshop will discuss guidelines for speech language pathologists and other clinicians to support their patients and families with the transition back to school following brain injury. Case studies of preschool through college aged patients will highlight clinical decision making as it relates to guiding patients and families with the return to school process beginning in the inpatient rehabilitation setting.

You are Invited:
March 26, 2025 at 5:30 p.m.
An Evening of Insight & Cinema:
Reception, Speaker, and Screening



Join us after Pre-Conference for complimentary appetizers, food, and refreshments.

Together we will watch an 18-minute documentary and hear from Jamie MoCrazy:
Professional Skier, TBI Survivor, & Motivational Speaker

(Not eligible for continuing education credit or ASHA CEUs)

Keynote: Benefits and Lived Experiences from Aphasia Book Clubs

Elizabeth Hoover, PhD, CCC-SLP, BC-ANCDS, ASHA Fellow: Clinical Professor, Clinical Director Aphasia Resource Center, Boston University, Boston, MA; Tim Sweeney: Stroke Survivor and Support Group Facilitator, BIA-MA, Milford, MA; Mary Borelli, MA: Stroke Survivor, Lynn, MA; Joe Zuccarello: Stroke Survivor, Waterbury Center, VT

Aphasia treatment groups provide an opportunity for people living with aphasia (PwA) to socialize with others who share similar concerns and experiences. One treatment group, the aphasia book club, aims to re-engage in meaningful and efficient reading which is a goal for many PwA. Book clubs exist in the broader community and may also support the return to a hobby enjoyed prior to the onset of aphasia. The focus of the book club is to encourage meaningful, authentic conversations about topics from a text using aphasia-friendly techniques. Finally, reading selected books and stories may also provide information and guidance to promote healing (bibliotherapy). This presentation will describe the theory and methods in delivering aphasia book clubs to PwA using both professional and peer group facilitators. Findings indicate that the experience of participating in book clubs is a meaningful social activity that has potential to impact language, communication and well-being.

Conference Schedule: Thursday, March 27, 2025		
7:00 a.m 8:00 a.m.	Registration and Sponsor, Exhibitor, & Poster Networking (Not eligible for continuing education credit or ASHA CEUs)	
8:00 a.m 8:30 a.m.	Welcome: Opening Remarks (Not eligible for continuing education credit or ASHA CEUs)	
8:30 a.m 10:00 a.m.	Keynote: Benefits and Lived Experiences from Aphasia Book Clubs Elizabeth Hoover, PhD, CCC-SLP, BC-ANCDS, ASHA Fellow: Clinical Professor, Clinical Director Aphasia Resource Center, Boston University, Boston, MA; Tim Sweeney: Stroke Survivor and Support Group Facilitator, BIA-MA, Milford, MA; Mary Borelli, MA: Stroke Survivor, Lynn, MA; Joe Zuccarello: Stroke Survivor, Waterbury Center, VT	
10:00 a.m 10:30 a.m.	Break: Sponsor, Exhibitor, & Poster Networking (Not eligible for continuing education credit or ASHA CEUs)	
10:30 a.m 12:00 p.m.	Session I: Workshops 10-16	
12:00 p.m 12:15 p.m.	Break: Sponsor, Exhibitor, & Poster Networking (Not eligible for continuing education credit or ASHA CEUs)	
12:15 p.m 1:15 p.m.	Lunch (Not eligible for continuing education credit or ASHA CEUs)	
1:15 p.m 1:30 p.m.	Break: Sponsor, Exhibitor, & Poster Networking (Not eligible for continuing education credit or ASHA CEUs)	
1:30 p.m 3:00 p.m.	Session II: Workshops 17-22	
3:00 p.m 3:15 p.m.	Break: Sponsor, Exhibitor, & Poster Networking (Not eligible for continuing education credit or ASHA CEUs)	
3:15 p.m 4:45 p.m.	Session III: Workshops 23-28	

Session I (10:30 a.m. - 12:00 p.m.): Workshops 10-16

10. Chronic TBI: Challenges, Interventions, and Funding Effects

Mel Glenn, MD: National Medical Director, NeuroRestorative, Acton, MA; Gordon Horn, PhD: National Director of Analytics and Clinical Outcomes, NeuroRestorative, Altamonte Springs, FL; Frank Lewis, PhD, CCT: National Director of Clinical Outcome Services, NeuroRestorative, Augusta, GA

People with traumatic brain injury may have chronic cognitive, behavioral, emotional, physical, and medical challenges. Some, especially the elderly, will experience functional decline, while others will continue to make gains. Susceptibility to dementia is controversial; the rate of employment is lower than in the general population; and life expectancy can lower as well. Cognitive, physical, and medical problems can be addressed through medical as well as lifestyle interventions. Function can be addressed with rehabilitation programs, even years after injury. Our current research has focused on the effects of legislated compulsory funding of post-hospital residential rehabilitation on outcome and length of stay after TBI and Stroke. Patients with compulsory funding started post-hospital rehabilitation earlier than patients without such funding. They had shorter lengths of stay and a lower level of disability (MPAI-4 Indices) at discharge than controls without compulsory funding who were matched by degree of impairment on admission.

11. Facilitating Caregiver Education in TBI

Rebecca Greenspan, DO: Clinical Fellow in Brain Injury Medicine; Yi Zhou, MD: Clinical Fellow in Brain Injury Medicine; Deena Godfrey, MD: Clinical Fellow in Brain Injury Medicine; Abigail Spaulding, PT, DPT, NCS: Physical Therapist Clinical Specialist; All with Spaulding Rehabilitation Hospital, Charlestown, MA Brain injury is increasingly being recognized as a chronic condition that deeply affects patients as well as their support systems. Navigating the medical landscape and managing the sequelae of brain injury can be a daunting task for most support persons. Caregivers consistently cite a lack of information about brain injury as a source of distress. Several survey studies have shown that caregivers desire more education from clinicians, especially at early stages of hospitalization after injury. During this multidisciplinary workshop, we will evaluate the gaps in information transfer from clinicians to caregivers, and explore ways that we as clinicians can bridge this gap.

12. Integrating Screening Systems: Brain Injury in Recovery

Robert Kirkman, MA, CAMS-II, NPT-C: Counseling Therapist, Alternative Living Center, Wilmington, VT. Kate Frissell, M.Ed., CADC-II, LADC-I: Clinical Director; Marc McNeice, CBIS: OBISSS Screener/Neuro Educator; Both with Alternative Living Center, Pittsfield, MA

Brain injuries often go unnoticed in substance use settings, profoundly impacting recovery. This workshop, presented by the Alternative Living Center (ALC), explores the implementation of NASHIA's OBISSS (Online Brain Injury Screening Support System) in residential and intensive outpatient (IOP) programs to address this invisible epidemic. Participants will learn how ALC leverages OBISSS to foster awareness, enable early recognition, and develop informed treatment plans that address cognitive deficits and emotional dysregulation. Emphasizing education for both staff and clients, this session highlights the role of multidisciplinary teams, psycho-educational groups, and community resources in supporting recovery and integration. By prioritizing brain injury awareness, recognition, and education, OBISSS can transform care, reduce barriers to healing, and improve long-term outcomes for individuals in recovery and other high-risk populations. Join us to discover how brain injury screening can enlighten individuals, empower recovery, and bring hope to those affected by this often-overlooked condition.

13. Loneliness & Social Isolation after ABI

Anthony Giuliano, PhD, CBIST, QBISP/Master Trainer: Clinical Psychologist/Neuropsychologist, Advocates & Department of Mental Health, Mirror Lake, NH

Imagine a condition that makes a person irritable, anxious, depressed, and self-focused, and is associated with social isolation and an elevated risk for medical morbidity and early mortality. Such a condition exists: loneliness. Adults with moderate to severe acquired brain injuries often live with the distressing challenges of social isolation and loneliness, and frequently report dissatisfaction with their social world. Meaningful social connections are an important source of identity that affects how people feel about themselves and their lives--an aspect of wellbeing. This workshop will review the burden and mental health outcomes of loneliness and social isolation, their determinants (cognitive, emotional, social, structural), models of loneliness and social recovery, and implications for clinical/service relationships, assessment, and interventions, including approaches to promote social participation and social recovery.

14. Murphys Don't Quit

Colleen Murphy, Author and Advocate; Lauren Murphy, TBI Survivor and Speaker; Both with Murphys Don't Quit, MDQ Productions, O'Fallon, MO

This presentation, led by mother-daughter duo Colleen and Lauren Murphy, highlights the power of resilience and determination in overcoming critical life challenges, drawing from Lauren's journey of recovery after a traumatic brain injury. By addressing evidence-based factors like social support, goal setting, and post-traumatic growth, the session inspires attendees to analyze recovery strategies, evaluate their effectiveness, and create actionable plans for resilience in their personal or professional lives. Attendees will leave equipped to apply these principles in real-world contexts, backed by research and motivational examples. The presentation will touch on the top 5 lessons learned while on Lauren's road to recovery, and will leave attendees feeling empowered and equipped with tools to face their own struggles or support others in theirs.

15. Return to (Work) Productivity After Acquired Brain Injury

Therese O'Neil-Pirozzi, ScD, CCC-SLP, ASHA Fellow: Associate Professor at Northeastern University; Director of Northeastern University Cognitive-Community Integration Lab and Northeastern University Traumatic Brain Injury Resource; Clinical Research Speech-Language Pathologist at Spaulding Rehabilitation Hospital, Research Faculty at Spaulding-Harvard TBI Model System, Boston, MA

Approximately 75% of individuals with an acquired brain injury (ABI) are of working age and as many as 70% of them want to resume work-related productivity in some capacity, including 1) paid full-time/part-time/supportive employment, 2) volunteer work, and 3) education/training programs. As a result of not being engaged in one of these work-related productivity capacities, well-being (e.g., health, function, quality of life) of many is significantly compromised, and financial and social burdens are great. This presentation will describe these four types of work-related productivity and research regarding them. Evidence-supported facilitators (e.g., vocational rehabilitation) and challenges (cognitive) regarding these will be discussed, and workshop attendees will be invited to engage in conversation regarding their experience and perceptions of these as well.

16. The Cognitive-Communication Impact of Aging on ABI

Amy Karas, MS, CCC-SLP, CBIS/T: Owner and Speech-Language Pathologist, Amy Karas, SLP LLC, Middleton, MA

This presentation will focus on the impact that aging has on individuals with acquired brain injury (ABI). By examining the cognitive-communication, voice, and swallowing changes associated with aging, we will explore how these challenges are compounded in individuals with ABI. The session will highlight practical cognitive-communication strategies, brain health optimization techniques, and relevant principles of neuroplasticity. Clinicians will leave with a toolbox of evidence-based approaches to therapy designed to improve function and enhance quality of life.

Session II (1:30 p.m. - 3:00 p.m.): Workshops 17-22

17. Evidence-Based Behavioral Interventions for Relaxation

James Green, MS, PhD(c), BCBA, LABA: Assistant Clinical Director, Vinfen, Weymouth, MA; Helena Whitlow-Stanzione, MS, PhD(c), BCBA, LABA: Assistant Clinical Director, Vinfen, Cambridge, MA
This practical workshop explores the rich history of behavioral science applied to some symptoms that are traditionally thought of as medical or psychiatric. The presenters will then provide a more detailed review of interventions specifically to assist with relaxation, which can provide relief from a variety of symptoms such as anxiety, pain, and insomnia. Participants will learn about two evidence-based interventions, Progressive Muscle Relaxation and Behavioral Relaxation Training, and practice doing abbreviated versions of both. Participants will be provided resources for additional information.

18. Foster A Successful Transition Post TBI to Higher Education

Jacquelyn Moynihan, MS, CCC-SLP: Clinical Supervisor, ICCR Program, Boston University, and Speech-Language Pathologist, Clinical Specialist, Spaulding Rehabilitation Hospital, West Roxbury, MA; Meredith MacEachern, MA, MS-SLP: Clinical Director, ICCR Program, Boston University, Boston, MA Transitioning to higher education can be a challenge for young adults, particularly those with a history of acquired brain injury (ABI). This workshop will provide survivors, families, clinicians, and support professionals with a comprehensive understanding of the cognitive, social, and emotional challenges faced by ABI survivors in the higher education setting. Participants will gain insights into how ABI affects learning and social integration, and will learn practical considerations to support students in navigating higher education successfully. By the end of this workshop, participants will be equipped with a toolkit of strategies to support young adults with ABI as they pursue academic goals, foster independence, and develop the skills needed for success in higher education. Whether you're a survivor, family member, clinician, or support staff, this session will enhance your ability to provide meaningful assistance to support study skills and further promote a more successful transition for students with ABI.

19. STEP-Home: Group Reintegration Workshop for TBI

Dylan Katz, MS: Director of Operations; Alexandra Kenna, PhD: Licensed Psychologist & Clinical Director; Caroline Sablone, Senior Research Assistant; All with TRACTS, VA Boston Healthcare System, Boston, MA; Catherine Fortier, PhD: Co-Director of TRACTS, Principal Investigator of STEP-Home, Both under VA Boston Healthcare System, Boston, MA

STEP (Short-Term Executive Plus) therapeutic workshops were originally created for survivors of moderate and severe brain injury at Mount Sinai Hospital in New York City. The program has been adapted as STEP-Home for Veteran survivors of mild traumatic brain injury (mTBI) struggling with daily stressors. This 12-week group workshop is offered via telehealth with approximately 3-6 group members led by 2 group co-leaders; it is designed to help Veterans with and without mental health diagnoses and has shown to increase treatment engagement, participation in life roles and relationships, and overall satisfaction with life. STEP-Home teaches practical skills and strategies that help with problem solving, managing anger and impulse control, and tolerating difficult emotions. Thanks to recent grant funding, the program now also focuses on suicide prevention discussion, and materials for Veterans who have separated from the military in the past three years.

20. Think Outside the Facility: MassHealth Services and Supports

Amy Bernstein, MMHS, LSW: Director of HCBS Waiver Administration; Eileen Gammetto, Eligibility and Operations Manager, MFP Demonstration; Erica Menz, MPA, Deputy Director, HCBS Waivers; Kim Simonian, MPH: Deputy Director, HCBS Waivers; All with MassHealth, Boston, MA

Amy Bernstein, Eileen Gammetto, Erica Menz, and Kim Simonian, all from Mass Health, describe Mass Health programs that are designed for adults who are interested in transitioning from nursing facilities or long-stay hospitals to the community, as well as programs that are designed to prevent institutionalization. These programs include the Massachusetts Home and Community Based Services (HCBS) waivers and the Money Follows the Person Demonstration grant. This workshop will cover the services available through these programs and will provide an overview of Mass Health eligibility requirements.

21. Trauma Recovery After Brain Injury: Approaches & Therapies

Joanie Phillips, MSW, LICSW, BCBA, CBIST: Director of Family Services/Clinical Social Worker, May Center School for Brain Injury and Neurobehavioral Disorders, Norwood, MA

Individuals with brain injury often experience high rates of comorbid PTSD. While several trauma-specific therapies have proven effective in alleviating PTSD symptoms and enhancing quality of life, these approaches may need to be adapted to meet the unique needs of those with brain injuries. This workshop will focus primarily on Eye Movement Desensitization and Reprocessing (EMDR) and Progressive Counting, exploring their potential benefits for this population. The presentation will provide an overview of both therapies, offer suggestions for necessary adaptations for the use with adults, children and adolescents, and include case examples to illustrate their practical application.

22. Weathering the Storm, Resilience in the Face of Trauma

Janet McBride-Roy, CTRS, CCM, CBIS: Director of Case Management Services; Brighid Vieira: Community Case Manager; Joy McMahon, MRC: Community Case Manager; All with Community Rehab Care, Waltham, MA

This workshop will focus on how women with brain injuries can be empowered and empower each other to face the challenges of sustaining a brain injury. An in-depth overview of challenges (physical, psychological, emotional, social, professional, and intellectual) and how they affect women with brain injuries will be provided. Specific strategies will be addressed and specific examples of women who have demonstrated resilience in the face of trauma of brain injuries will be highlighted.

Session III (3:15 p.m. - 4:45 p.m.): Workshops 23-28

23. Bridging the Gap: How Smart Devices Help After Brain Injury

Michelle Wild, MA: Founder & CEO, Brain Education Strategies & Technology Inc., Lakewood, CA Smart devices have many built-in features and applications that brain injury survivors can use to manage their daily lives. These tools provide practical assistance and solutions to help survivors overcome cognitive difficulties and regain independence. Unfortunately, few survivors and even professionals know much about the wide range of tools available or how to use them effectively. This workshop will explore smart device tools survivors can use to overcome daily obstacles and make their lives easier. It will examine them using the Making Cognitive Connections approach to learning and cognitive rehabilitation, which helps brain injury survivors rebuild cognitive skills and develop strategies for a better life. This process can help survivors understand how skills work together and how technology can reinforce them. We will explore features and applications designed for the general public and those catering to brain injury survivors' needs and challenges.

24. Exploring the Intersection of Substance Use and Brain Injury

Princess Alston, LMHC, CADC: Director of Substance Use, Vinfen Corporation, Cambridge, MA

This workshop examines the complex relationship between substance use and brain injury, exploring how substance use can both result from and exacerbate brain injuries. Participants will learn how these dual conditions impact cognitive, behavioral, and social functioning and evidence-based strategies for adequate care and intervention. This session is ideal for medical professionals, caregivers, and social service providers seeking understanding and practical approaches to address these intersecting challenges in brain injury recovery.

25. Hidden Injuries: Domestic Violence and Brain Injury

Amanda Tower: Grant Project Coordinator, MassAbility, Ipswich, MA; Brie Insalaco, PhD: Clinical Operations Director, MassAbility, Weymouth, MA; Jillian Nebesar, MA, LMHC: Director of Programs and Community Partnerships, Healing Abuse Working for Change (HAWC), Salem, MA

Discover the intersection between domestic violence (DV) and brain injury, a link further highlighted by a global rise in DV incidences during the COVID-19 pandemic. This workshop will explore at-risk populations, barriers to accessing services and the importance of brain injury screening. Despite growing research in this area, gaps remain in understanding long-term outcomes across diverse populations. Available research does indicate more complex outcomes for individuals experiencing DV and brain injury, including greater difficulty accessing resources. Learn about the complex health outcomes individuals may face, including chronic medical and mental health conditions such as PTSD and depression and health risk behaviors such as substance misuse. The unique challenges related to risk of multiple lifetime injuries that are often unidentified or untreated will also be discussed. Join us to increase awareness of high-risk groups and explore strategies to improve health outcomes.

26. Music For Your Brain: Music Therapy in ABI Rehabilitation

Beth Katz, MMT, MT-BC, NMT-F: Neurologic Music Therapist & Owner, Neurosona Music Therapy, Cambridge, MA

Music therapy is a rapidly growing field that uses evidence-based methods for treatment of a variety of diagnoses. Neurologic music therapy is a specific type of music therapy based on the neuroscience of how the brain processes music. It has been proven to be an effective treatment to address impairments after a brain injury. This workshop will provide an overview of how music can be used to facilitate neuroplasticity and improve functioning in cognitive, speech and language, sensorimotor and social-emotional areas after a brain injury. Participants will learn how music therapy can be incorporated into neurorehabilitation treatment plans for individuals with brain injuries.

27. Should I/They Return to Driving After Acquired Brain Injury?

Kristen Dixon Keilty, MSOT: Certified Driver Rehabilitation Specialist with CMSC Auto School, Occupational Therapist with Emerson Hospital, Concord, MA

Individuals, families, and clinicians struggle with this question. Will driving be safe? How best to explore this? Which factors/symptoms would be red flags to advise against driving? Who are the providers in MA? Are there funding opportunities? Driving evaluation programs have been available in MA for more than 20 years, however, programs and resources continue to evolve. A Massachusetts occupational therapist and certified driver rehabilitation specialist shares her knowledge and expertise to help guide individuals and their care teams to seek out the appropriate services at the appropriate time. "No go" factors will be discussed. A current list of Massachusetts and New England driver evaluation/training resources will be provided.

28. The Boston Assessment of TBI Lifetime, 2nd Edition (BATL-2)

Arielle Knight, MPH: Senior Program Manager; Alexandra Kenna, PhD: Clinical Director; Both from Translational Research Center for TBI and Stress Disorders (TRACTS), VA Boston Healthcare System, Boston, MA. Tristan Colaizzi, Medical Student, Virginia Tech Carilion School of Medicine, Roanoke, VA. Catherine Fortier, PhD: Co-Director, Translational Research Center for TBI and Stress Disorders (TRACTS), and Associate Professor, Department of Psychiatry, Harvard Medical School, Boston, MA

The BAT-L is an extensively validated and widely used semi-structured clinical interview designed to diagnose traumatic brain injury (TBI) across the lifespan. Using a forensic approach, the BAT-L differentiates clinical symptoms of TBI (e.g., altered mental status, posttraumatic amnesia, loss of consciousness) from other common physiological and psychological responses to head injury and trauma. The second edition of the BAT-L, the BATL-2, improves retrospective brain injury characterization by including assessments of repetitive blunt and occupational blast exposures, adding refined clinical queries, and incorporating new field standards for TBI classification while maintaining VA/DOD guidelines. Additionally, the BATL-2 offers a modular approach to reduce administration time burden and expand applicability. We describe the new components of the BATL-2 and the results of an initial psychometric evaluation in two samples of military Veterans.



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