

Mild Traumatic Brain Injury: The Counselor's Role in Identification and Treatment

North Dakota Mental Health Counselors Association
Pre-conference Workshop
February 8, 2020 from 9:00am-4:00pm
Radisson Hotel, 605 E Broadway Ave, Bismarck, ND
6 CEUs available from a variety of boards

Registration Rates (Early bird rates end January 1, 2020)

NDCA member \$60.00 NDCA Graduate Student members \$25.00
Non-NDCA members \$70.00 All, after January 1, 2020 \$80.00

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Jenise Wilson
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For Questions, Contact:

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CEU approval pending through the following licensure boards: North Dakota Board of Counselor Examiners, North Dakota Board of Social Work Examiners, North Dakota Board of Addiction Counselor Examiners, North Dakota Marriage and Family Therapy Licensure Board, North Dakota State Board of Examiners on Audiology and Speech-Language Pathology, and North Dakota State Board of Psychologist Examiners.

This workshop is sponsored by:



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Presentation Title:

Mild Traumatic Brain Injury: The Counselor's Role in Identification and Treatment

Presenters: Brian Smith, LCPL, NCC

Shauna Smith, MS, CCC-SLP

For information about the presenters, see page 5.

Program Goals: Participants will learn to:

1. Identify symptoms and assess for mild TBI
2. Learn strategies for working with clients with mild TBI and their families (e.g. communication partner competencies)
3. Learn appropriate interprofessional referrals and how to participate in continuum of care

Schedule: Registration begins at 8:00 am and the workshop begins at 9:00. Lunch is on your own. We will have breaks at 10:30 and 2:30.

Abstract

Mild traumatic brain injury and post concussion syndrome often go undiagnosed due to unsought medical care, inconclusive screening or scans, and poor societal education regarding causes and effects of mild TBI. It is likely that a counselor could be the first professional sought by a client suffering from the effects of mild TBI, making recognition and referral to other disciplines invaluable. It is imperative that mental health counselors work together with other related professionals, such as speech-language pathologists, in the treatment of individuals with TBI as the cognitive deficits associated can affect performance, communication, emotional regulation, relationships, and occupation. By approaching treatment of mild TBI as a team, addressing cognitive deficits and related psychosocial and emotional impact, this will facilitate their ability to achieve ultimate outcomes and mitigate barriers to treatment by either discipline.

This presentation will cover identification of symptoms, the role of the SLP and counselor in the treatment of individuals with TBI, methods for effectively assessing and treating individuals with TBI within the counseling setting, training in specific communication and treatment strategies, and effective team collaboration.

Background

Mild traumatic brain injury and post concussion syndrome often go undiagnosed due to unsought medical care, inconclusive screening or scans, and poor societal education regarding causes and effects of mild TBI. It is likely that a counselor could be the first professional sought by a client suffering from the effects of mild TBI, making recognition and referral invaluable. In

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this capacity, a mental health counselor can be in a unique position regarding identification and rehabilitation of mild TBI due to the impact of symptoms on emotions, communication, and relationships; in this role, counselors have an important opportunity to create interprofessional relationships with practitioners in other health care fields.

Counselors and speech-language pathologists (SLPs) share common therapeutic territory when treating clients with mild TBI. SLPs are trained to assess and treat cognitive and communication deficits, including those which affect memory, attention, and executive functioning (e.g. judgment, problem solving, higher level cognitive skills, decision making). SLPs directly address speech, language, and social communication and related skills in treatment, and help the client retrain and compensate for areas of deficit. In addition to this, SLPs also provide education and informational counseling to clients and family regarding diagnosis and areas of deficit, including motivational interviewing, identification of realistic functional goals, and communication partner training. Interprofessional collaboration between counselors and SLPs has the potential to address more areas of concern and reinforce treatment, resulting in a more complete and healthy recovery for clients with mild TBI.

Mild TBI constitutes 80-90% (approximately 2.3 million) of TBI cases in U.S., and includes multiple terms, definitions, and diagnostic criteria. The American Congress of Rehabilitation defines mild TBI as a traumatically induced physiological disruption of brain function with at least one of four manifestations: any loss of consciousness (LOC); any loss of memory for events immediately before or after injury; any alteration in mental status at time of accident; focal neurological deficits that may or may not be transient. Mild TBI is usually not found by radiological means (CT/MRI), and the client may be unaware of LOC if it is brief or he or she is alone. Most mild TBI results in good recovery of symptoms in approximately one to three months, but some clients may have persistent symptoms resulting in social and vocational difficulties that appear to be out of proportion with the severity of the neurologic insult. Therefore, the client could present in counseling for any number of seemingly unrelated presenting issues, and it is important for the counselor to consider the possibility of mild TBI and be able to identify key markers and symptoms.

Once a client has been identified as possibly suffering from mild TBI, the counselor can collaborate with an SLP to confirm this diagnosis in conjunction with a physician and develop a complimentary treatment plan. The counselor can also tailor interventions to address issues specific to clients with mild TBI (e.g. limited insight and fatigue, frustration, and anxiety) and help the client's family and support system understand the symptoms and healing process in order to maximize recovery and minimize impact of symptoms on family system and

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occupation. The counselor/SLP team can also collaborate in order to identify other appropriate referrals and occupational accommodations.

When considering the importance of integrated care and practice issues pertaining to clients with mild TBI, it is vital that counselors understand how to identify the possible signs of mild TBI and work with clients and other healthcare practitioners in order to provide the optimal level of care to these clients and their families.

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About the Presenters

Shauna Smith, MS, CCC-SLP is a speech-language pathologist, and Clinical Professor and Clinic Director at Idaho State University in the Department of Communication Sciences and Disorders. Prior to becoming a faculty member at ISU, Shauna was the primary SLP of an outpatient brain injury team for several years. She also provides supervision to graduate students in clinic working with adults with neurological disorders, and teaches the Medical Based Issues graduate course, preparing students to work in the medical setting. One of her primary areas of interest is the functional treatment of individuals with TBI, and she has presented at the state and national level on inter-professional collaboration when working with this population.

Brian Smith is a Licensed Clinical Professional Counselor at Family Counseling Services in Meridian, Idaho. Brian attended graduate school at Idaho State University and earned a Masters of Counseling in May of 2014. He completed an internship at the Boise Vet Center, where he gained experience in working with couples, veterans with PTSD, and comorbid instances of mild traumatic brain injury. Brian currently works with adolescents and adults in individual, couples, family, and group settings, with a clinical focus including anxiety and depression, trauma, and relationship distress within a systemic framework.

Brian has served as President of the Idaho Mental Health Counselors Association, and is the current Past President of ICA. Since 2014, he has presented in academic settings, and at state and national conferences for both counselors and speech language pathologists on collaboration of care for clients with mild TBI in both the civilian and veteran community.