

PRESENTS



MOVING FORWARD

— TOGETHER —

· BIAMD ·

2022 BIAMD ANNUAL CONFERENCE

DoubleTree, Pikesville

Pikesville, MD May 12-13, 2022

General Information

Welcome to the Brain Injury Association of Maryland's 33rd Annual Education Conference "Moving Forward Together".

What has happened in the world, and to all of us living in it these past two years, can't be summed up in a word, a sentence, a paragraph or even a book. The effects of COVID-19 on the way we have lived and the way we will live in the future are too varied and nuanced to even comprehend. Nonetheless, like those of us who have had catastrophic injuries and come out the other end, we are all now "survivors". We lost family, friends, colleagues, and loved ones to this devastating virus, but we are here today.

We are gathered here, in person, to reconnect with friends, renew acquaintances, and rededicate ourselves to improving our lives and the lives of those we love and serve in the brain injury community. Like many organizations, the Brain Injury Association of Maryland was forced to "pivot" into the new world of telecommuting, Zoom meetings and webinars, and remote learning. Thankfully, our amazing Board, staff, volunteers, and community partners were more than willing to do the work necessary to continue our mission of serving the brain injury community through education, outreach, case management and service. It was only because of individuals like those of you joining us at this conference and so many others, that we were not only able to survive, but thrive in this new normal.

We took many lessons from those we serve in the brain injury community. Lessons like "Don't be afraid to fail"; "It's not how many times you fall down, it's how many times you get back up", "Well, that didn't work, try

something else"; "No amount of worrying is going to change what's going to happen, so don't"; and "not all storms come to disrupt your life, some come to clear your path". We learned of the need for flexibility, patience, and kindness especially to ourselves and each other. Over and over again throughout the surges and returns and restrictions, we were constantly reminded of the vibrance of the community our organization was privileged to serve.

We mourn those who have died. We acknowledge those that are continuing to struggle. We celebrate those scientists and healthcare workers of every stripe that served us and the rest of the world tirelessly to bring through this crisis. And today, we treasure those of you that have chosen to join us as we rekindle the spark that brought us together every year for almost four decades.

We thank you for your courage, enthusiasm, and presence. We hope you can find several golden moments you can take with you back to your homes, practices, or workplaces to cherish and make a part of your life. Our conference committee has been meeting for a year to bring these offerings to you. We thank them for their dedication to making this happen under continually shifting circumstances. And we thank you for being here with us. We wish you a wonderful conference.

The letters below appear at the listing for each breakout session and indicate the target audience for the sessions. Anyone is welcome to attend any of the sessions, except for those sessions marked as "S only" and "F only."

S = Survivors

F = Family members

H = Healthcare professionals

E = Educators

A = AII

2022 BIAMD CONFERENCE COMMITTEE

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Family Member

Chris Schaffer

Executive Assistant—BIAMD



Sponsorship Levels

The Brain Injury Association of Maryland (BIAMD) gratefully acknowledges the generosity of the following underwriters and sponsors who have committed their support to this conference and BIAMD.

Conference Partner



Platinum Level





Gold Level







Emerald Level













Public Service









The Conference

Moving Forward Together is a multi-track neuroconference focusing on issues related to: individuals with brain injury and family members, children and adolescents in the school system, advocacy, and professional and clinical training. The purpose of the two-day conference is to provide state-of-the-art information about brain injury treatment, services, research, and advocacy, and to improve collaboration and networking between individuals with brain injury, families and professionals.

Location

We are pleased to be at the DoubleTree in Pikesville. Our new home for the conference will allow us to increase the number of vendors and participants, all in an easily accessible space.

Serenity Space - This year ... has been designated and accommodated to serve as our Serenity Space. PLEASE DO NOT USE CELL PHONES OR HAVE CONVERSATIONS OF ANY KIND IN THIS SPACE.

The Bell - we will be using a bell to signal when it is time to move to your next session.

Cell Phones and other Electronic Devices please turn your cell phone and pagers off or switch to vibrate mode during the conference. Please refrain from using your cell phone while in a conference session (especially if you are presenting).

Conference Disclaimer:

The Brain Injury Association of Maryland does not support, endorse or recommend any specific method, treatment, or program for individuals with brain injury. We endeavor to inform and educate, and we believe that you have the right to know what information is available

Please do not video-tape or audio-tape any of the sessions unless you have made previous arrangements through BIAMD. Thank you for your cooperation.

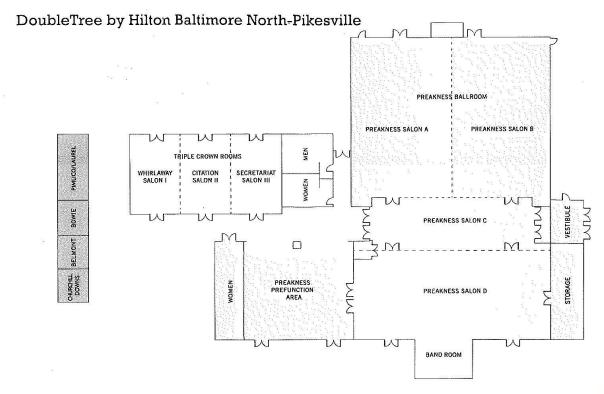
COVID Precautions:

The BIAMD utilizing the updated healthcare procedures around check-in, breakout sessions, and food service.

CONFERENCE SESSION HANDOUTS

BIAMD has gone **GREEN!** If provided by the presenter, electronic versions of session handouts will be available for download at www.biamd.org under the EVENTS tab.

Handouts will remain available at www.biamd.org through August 31, 2022.





CONFERENCE INFORMATION

EVALUATION FORMS

Your opinions are very important to us and to our presenters. We have provided evaluation forms in your conference folder. Additional blank copies will be available in each break out room. Please fill out one seminar evaluation for each presenter/seminar and return it to the Moderator in the room. The Conference Committee will use your evaluations to help plan the 2023 conference.

This year, you will be receiving an email form with the Overall Conference Evaluation on Monday, May 15, 2022. Thank you for taking time to complete the forms and helping us make next year's conference even better.

CONTINUING EDUCATION UNITS (CEUs) & CERTIFICATES OF ATTENDANCE

We will be offering the following CEUs for this conference:

- Commission for Case Managers
- **♦** Commission for Rehabilitation Counselors
- **♦** Maryland Board of Physical Therapy Examiners
- ♦ Maryland Board of Examiners for Audiologists, Hearing Aid Dispensers, and Speech-Language Pathologists
- ♦ Maryland Board of Nursing
- **♦** Maryland Board of Occupational Therapy Practice
- ♦ Maryland Board of Professional Counselors
- **♦** American Therapeutic Recreation Association
- ♦ Maryland Workers' Compensation Commission (MD WCC MCRSP)
- **♦** The Maryland Board of Social Work Examiners certifies that this program meets the criteria for Category I continuing education for social workers and associates licensed in Maryland.
- **♦** The Maryland Board of Psychologists has stated that CEUs provided through the Maryland Board of Social Work Examiners will be accepted for those wishing psychology CEUs.

This continuing nursing education activity has been given approval by the Maryland Nurses Association, an accredited approver by the American Nurses Credentialing Center's Commission on Accreditation.

- ♦ If you are a **Certified Brain Injury Specialist (CBIS)** or **Certified Brain Injury Specialist Trainer (CBIST)**, the CEUs that you receive for your discipline (OT, PT, etc.) or the general Certificate of Attendance may be used towards renewing your certification. According to the staff at ACBIS, there is no special certificate- cate for CBIS.
- ♦ General Certificates of Attendance will be provided upon request.

If you are requesting CEUs for ATRA, there is paperwork that must be completed for each session that you attend; please ask at the Registration Desk for the ATRA CEU packet. Please also note that there is an additional \$20 charge for ATRA to process your paperwork.

ATTENDANCE VERIFICATION

The various professional accrediting bodies listed above have only provided our CEU authorizations for the complete program for each day, rather than individual breakout sessions. In order to offer CEUs and Certificates of Attendance at our events, we must be able to confirm the attendance of our participants. To accomplish this, we have created Attendance Verification/CEU Request Forms that can be found in the material provided at registration. Please complete and return this form each day that you attend the conference. This will provide us proof of your attendance and allow us to continue offering continuing educational credits in the future.

THURSDAY, MAY 12, 2022

7:15 am - 8:00 am REGISTRATION AND CONTINENTAL BREAKFAST 8:00 am - 8:15 am WELCOME AND CONFERENCE OVERVIEW

8:15 am - 9:30 am OPENING KEYNOTE ADDRESS

TRACK-TBI: A 10 Year Journey to Transform Research and Clinical Knowledge in TBI

Geoff Manley, MD, PhD

Dr. Manley will discuss lessons learned from leading 10 years of TRACK-TBI. TRACK-TBI collects and analyzes clinical data on TBI patients and control subjects at 18 U.S. level 1 trauma centers. Having enrolled over 3,000 participants, TRACK-TBI has developed a nationwide team of experts that is developing a modern precision medicine information commons for TBI that integrates clinical, imaging, proteomic, and outcome biomarkers to drive the development of a new TBI disease classification system, which could revolutionize diagnosis, direct patient-specific treatment, and improve outcomes.

9:30 am - 10:00 am **BREAK/EXHIBITORS/SILENT AUCTION**

10:00 am - 11:00 am CONCURRENT MORNING BREAKOUT SESSIONS - A

Please choose only one session and make your selection for the appropriate course on the online registration form.

A1 Back to Good (Survivors Only)

Martin Kerrigan, MA, Ed.S. (S ONLY)

Survivors of brain injury often find themselves pursuing new work and pastimes, and in both cases, the process can be as much about self-discovery as it is about learning new skills and tasks. This interactive session will engage participants in the topic of recovery as just one more expression of the lifelong journey that all people take. This first session will look at the story of one person who suffered a traumatic brain injury and their struggle to redefine who they were. Although brain injury brings distinct challenges, we grow and evolve in the search for what we do well and what makes us happy.

A2 Caregivers Sharing Session (Non-Professional Caregivers Only)

Terry Kirtz, MEd, CBIS (F ONLY)

This session is an open forum where caregivers can share—in a non-threatening environment—the trials and tribulations that they encounter while caregiving for individuals with brain injury. Resources and coping techniques for the caregiver and individuals with brain injury will be shared. This session is open to family and friends who are caregivers—*it is not for professional caregivers*.

A3 Traumatic Brain Injury Among Female Veterans Experiencing Homelessness – A Case Study—CANCELLED (H, E, F) Stephanie Felder, PhD, LCSW, LCAS-A, BCD

This presentation will provide an overview of behavioral health symptoms that are common after mild traumatic brain injury. These symptoms include feelings of depression, anxiety, mood swings, outbursts, and irritability. The presentation will examine a case study of a 32-year-old homeless female veteran with TBI. This veteran participated in a qualitative exploratory study that used a life course perspective to examine how TBI and other experiences influenced female Veterans' pathways into homelessness.

A4 Safe AT Home: AT to keep you Functional, Safe, and Independent at Home

James Whitney, OTR/L, OTD (A)

This presentation will serve to briefly explain the Maryland Assistive Technology Program's (MDTAP) scope of practice and how to reach out and get started with a device demo, device loan, or financial loan. Then we will dive into the world of AT specifically addressing ways to incorporate AT at home to save money with caregiver's, increase independence, quality of life, and functionality with regard to brain injury.

A5 OT's Role in Oral Motor and Self-Feeding: Anatomy and Basics of Swallowing, Evaluation of Self-Feeding Deficits, Treatment Approaches & Documentation Sonya Boltansky, OTR/L, CBIS (H)

According to AOTA, the acts of feeding, eating, and swallowing are strongly influenced by psychosocial, cultural, and environmental factors. It is within the scope of occupational therapy to evaluate, treat, and discuss their client's swallowing and eating function. This presentation will review OT's role in oral motor, swallowing, and feeding. We will review common diagnoses with neurological impairments that result in dysphagia, basic anatomy of the mouth, stages of swallowing and clinical signs of aspiration. Lastly, explore formal and informal evaluations of swallowing and implementation of oral motor preparatory and compensatory strategies. Eating is essential for nourishment of the body, participating in social interaction, and involvement in a person's culture. It is important to understand the physical, cognitive, social, emotional, and cultural elements of feeding, eating, and swallowing.

A6 Blooming After Brain Injury: Therapeutic Horticulture for TBI Survivors

Jamie Sumague, OTR/L (A)

Learn how nurturing plants and farming practices can promote healing in individuals with brain injury. Explore therapeutic horticulture from an occupational therapy framework.

Thursday's schedule continues on the next page.



Please choose only one session and make your selection for the appropriate course on the online registration form.

B1 Accommodations in Higher Education

Kate Weeks, MS (A)

We will review the differences throughout various college settings, in terms of support services. We will also review the process for registering as a student with a disability to receive reasonable accommodations in a college setting. We will take time to review possible reasonable accommodation options, as they are determined on a case-by-case basis, focusing on options related to brain injuries as well. There will be time for a Q&A.

B2 LSVT Big® Treatment for Individuals with Brain Injury: Can research targeting Parkinson's Disease translate to functional improvement in individuals with CVA and TBI? Rachel Guilfoyle, OTD, OTR/L, SCLV, LSVT Carley Eutsler, BS; McKenna Schaeppi, BS (A)

This course seeks to introduce the LSVT Big® Treatment for Parkinson's Disease as a rehabilitative approach to both stroke and traumatic brain injury. This standardized protocol promotes neuroplasticity to recalibrate the sensory system through high -amplitude movements (Ebersbach et al., 2014). While using this protocol for individuals with stroke or traumatic brain injury is still relatively new, preliminary research has connected the protocol to improved performance in client-identified occupations and decreased impairment (Proffitt, et. al, 2018).

B3 Cognitive Rehabilitation in Individuals with Acquired Brain Injury: Recommendations from ASHA's Evidence-based Clinical Practice Guideline Tobi Frymark, M.A., CCC-SLP

Catherine Rinehart Mello, BS, CBIS Linda Picon, MCD, CCC-SLP (A)

This session will delve into the recommendations of ASHA's evidence-based clinical practice guideline on cognitive rehabilitation in adults with acquired brain injury. Developed by a multidisciplinary panel of subject matter experts alongside methodologists from ASHA's National Center for Evidence-based Practice, this guideline aims to examine the efficacy of different aspects of cognitive rehabilitation using scientific evidence. Guideline implementation from a clinical and consumer perspective will be discussed.

B4 Collaborating with Medical Interpreters to Improve Intercultural Patient Communication—CANCELLED (H)

Sonva Boltansky, OTR/L, CBIS

Research shows that patients with limited English proficiency are at an increased risk of being misunderstood by their physicians, which then leads to a greater risk of inadequate communication and care. This presentation will review the legal implications and research, discuss the benefits of working with medical interpreters and consequences when we don't, and teach best practices when working with interpreters. If you can't communicate with your patients, then you can't provide care. The use of medical interpreters—services is required to provide high-quality health care. It is crucial that healthcare providers collaborate with medical interpreters to improve intercultural patient communication.

B5 Action on Overdose: Keeping up the Energy During a Long and Evolving Crisis Laura Bartolomei-Hill, LCSW (A)

This session will examine overdose from a brain injury perspective. We will introduce concepts of harm reduction, consider policy and service opportunities, and discuss supporting each other as we address this evolving crisis over the long haul.

B6 Life After TBI: The Good, The Bad, and The Catch 22

Christina Osheim, MFA (A)

Medical science has come incredibly far in preventing TBI deaths. Fabulous, but also a double edged sword. We live with a trauma that will never be healed, unlike breaks, illnesses, cancers that are curable. The lack of Federal standards, huge differences in how state disability programs work, financial restrictions if receiving support and a medical insurance systems that wants an end date make life after a Sisyphean journey for many. This talk covers these things, but through the idea of creativity as a survival tool. Not art therapy, but craft as a way to give value and meaning to life and personal growth. These individualized skillsets and personal growth are also avenues for financial gain for individuals and Brain Injury Organizations to work with setting a nationalized financial and medical support baseline for survivors in the country.

12:30 pm - 1:30 pm LUNCH

1:30 pm - 2:30 pm GENERAL SESSION (A)

BIAMD will describe the clinical brain injury resources available to survivors, family members, caregivers, and professionals, including programs administered by the Department Mental Health and Hygiene and the Department of Aging, and demonstrate how using evolving technologies, such as new searchable websites, relational database call centers, and online consumer service capabilities has improved the access to and quality of care.

2:30 pm - 2:45 pm BREAK/EXHIBITORS/SILENT AUCTION

Thursday's schedule continues on the next page.



Please choose only one session and make your selection for the appropriate course on the online registration form.

C1 Implementation of Noninvasive Brain Stimulation in an Outpatient Clinical Neurorehabilitation Program (H)

April Pruski, MD, MBA; Pablo Celnik, MD

Non invasive brain stimulation can be utilized as an adjuvant to neurorehabilitation. Brain Stimulation has proved to be a highly promising neuromodulation tool as an adjuvant to standard neurorehabilitation services including Physical Therapy, Occupational Therapy, and Speech Language Pathology. This session will focus on the Johns Hopkins Non-Invasive Brain Stimulation (NIBS) Rehabilitation Program that has developed identified best practices for using tDCS as a rehabilitation adjuvant in the real world to help improve neurorehabilitation outcomes.

C2 Sleep After Brain Injury

Daniel Krasna, MD (A)

Sleep dysfunction is common after brain injury. There are multiple types with various different treatments though there are some general tips that can help improve sleep quality in all patients. The prompt recognition of sleep dysfunction can avoid numerous other symptoms that may be misattributed as being directly caused by brain injury including poor mood, impaired cognition and lethargy.

C3 Intimate Partner Violence & TBI

Audrey Bergin, MPH, MA; Laura Dougherty, BSW, MS (H)

This presentation will look at intimate partner violence and abuse and the intersection with Traumatic Brain Injury (TBI). We will discuss the dynamics of intimate partner abuse, prevalence of TBI, and impact of TBI on victims of abuse. Ways to assist individuals with both intimate partner violence and TBI will be explored as well.

C4 Caregiving across communities, shared resources for Marylanders and their families living with Brain Injury (A)

Jennifer Eastman, MBA; Anastasia Edmonston, MS, CRC

This workshop will provide an overview of resources and best practices available to support an individual with a brain injury and their family and/or informal caregiver. Programs that offer respite and caregiver support will be highlighted in addition to the Maryland Technology Assistance Program, which has an array of resources that can substitute for human assistance. Caregiver assessment tools implemented in other states will also be explained. A short video of one family's experience in caregiving for an adult son living with significant TBI related challenges will be shared.

C5 A New Brain Injury--Now What? Navigation through Acute Hospitalization and Beyond

(A)

Carrie McPherson, LCSW-C; Donna Bandzwolek, RN

Brain injuries are often a complex and misunderstood medical condition which leads to complex and often suboptimal plans to transition patients into the community. Presentation will address lessons learned by a program director and front line SW case manager when given the task of planning a safe and appropriate discharge for a patient with a newly diagnosed brain injury. What factors must you consider when making a safe discharge plan? What resources, logistical and financial, are available? What barriers may you encounter? How do you gather support from other medical professionals who may not know what goes on behind the scenes? What happens after rehabilitation? This presentation is intended for all members of the medical team to gather an understanding of the multiple layers and why it is not so easy to "get them out".

C6 Functional Neurologic Symptoms within the Context of Neurorehabilitation

(H)

Jessica McWhorter, PhD and Tyler Rickards, PhD

Functional neurologic symptoms can be challenging to understand and address. When such symptoms emerge within the context of neurorehabilitation it becomes even more challenging to establish an understanding of an individual's barriers to functioning and how best to address such challenges. This presentation aims to review not only the basics of functional neurologic symptoms and disorders, but also to explore them within the context of neurorehabilitation.

3:45 pm - 4:00 pm

BREAK/EXHIBITORS/SILENT AUCTION

4:00 pm - 5:15 pm

CLOSING KEYNOTE

Back to "Good"

Martin Kerrigan, M.A., Ed.S, CBIS

Martin Kerrigan was a 19 year old college student in 1998 when he sustained a severe traumatic brain injury. He went from an independent self- sufficient young man to being totally dependent on others for the most basic life tasks. Martin was able to make a remarkable recovery but had some stumbling blocks along the way to becoming who he is today. Martin is currently employed a public school teacher. He also is a part time contractual employee of the Maryland Behavioral health Administration. Martin regularly presents on topics relating to brain injury including working with students with brain injuries and substance abuse and brain injury. This presentation will discuss some of those stumbling blocks as well as overcoming them and what was learned from them. "Back to Good" is one person's unique journey through life as an individual with a brain injury.

FRIDAY, MAY 13, 2022

7:15 am - 8:00 amREGISTRATION AND CONTINENTAL BREAKFAST

8:00 am - 8:15 am WELCOME & CONFERENCE OVERVIEW

OPENING KEYNOTE 8:15 am - 9:30 am

Department of Defense Brain Health Initiative

Kathy Lee, MS, CRNP, ANP-BC

The Department of Defense mission to defend the Nation hinges on a warfighter's ability to make expedient and effective decisions on the battlefield. To perform at the highest levels, cognitive and physical capabilities must be optimized by addressing brain health, potentially hazardous brain exposures, traumatic brain injury and the longterm or late effects from exposures and injury. The Warfighter brain health plan utilizes a synchronized approach to address risk to brain health, to include blast and directed energy exposures and/or TBI. The capability for early identification and mitigation of potential exposures to brain health should lead to the reduction of injury and longterm and late effects in a Warfighter's life.

9:30 am - 10:00 am BREAK/EXHIBITORS/SILENT AUCTION

CONCURRENT MORNING BREAKOUT SESSIONS - D 10:00 am - 11:00 am

Please choose only one session and make your selection for the appropriate course on the online registration form.

D1 **Back to Good (Survivors only)**

Martin Kerrigan, M.A., Ed.S. (S ONLY)

Survivors of brain injury often find themselves pursuing new work and pastimes, and in both cases, the process can be as much about self-discovery as it is about learning new skills and tasks. This interactive session will engage participants in the topic of recovery as just one more expression of the lifelong journey that all people take. This session will explore how survivors of brain injury must often look at who they are and redefine certain aspects of their identity. Although brain injury brings distinct challenges, we grow and evolve in the search for what we do well and what makes us happy. Please come prepared to share your own experiences.

D2 Caregivers Sharing Session (Non-Professional Caregivers Only)

Terry Kirtz, MEd, CBIS (F ONLY)

This session is an open forum where caregivers can share—in a non-threatening environment—the trials and tribulations that they encounter while caregiving for individuals with brain injury. Resources and coping techniques for the caregiver and individuals with brain injury will be shared. This session is open to family and friends who are caregivers—it is not for professional caregivers.

D3 Neuropsychiatric Symptoms after Traumatic Brain Injury

Durga Roy, MD (A)

This talk will review the current diagnosis and management of neuropsychiatric symptoms that develop after traumatic brain injury.

Pediatric Acquired Brain Injury: Common Neurobehavioral Presentations and Outcomes D4

(H)

Kelley Jones, Ph.D, ABPP; Megan Kramer, Ph.D, ABPP This presentation will provide an overview of common pediatric neurological conditions that impact cognitive, behavioral, and emotional functioning (e.g., TBI, stroke, encephalitis). We will review the impact of these conditions on brain structure and functioning. Factors influencing short- and long-term outcomes will be discussed, with an emphasis on considerations for the brain injury professional working with children with acquired brain injury.

D5 Visual Consequences of Traumatic Brain Injury—Vision Rehabilitation and the Optometrists Role in Recovery (F, H) Michelle May, OD, FCOVD; Katherine Cioffi, OD

This presentation will discuss the effects of brain injury on the visual system and the means by which visual system dysfunction can be treated with vision therapy rehabilitation.

Neurologic Music Therapy with Traumatic Brain Injuries; How Neurologic Music Therapy can boost Brain injury recovery **D6** and affect Brain Function Rosemary Williams, MT-BC & Diana Cortes, MT-BC (A)

Music and the brain has been a long time researched topic that has led to major contributions to the neurorehabilitation field. In this presentation, we will review how Neurologic Music Therapy is used to target cognitive, sensorimotor, and speech & language goals for people recovering from a brain injury. We will explore different resources available for attendees to share with their patients and colleagues.

Friday's schedule continues on the next page.



11:30 am – 12:30 pm CONCURRENT AFTERNOON BREAKOUT SESSIONS – E

Please choose only one session and make your selection for the appropriate course on the online registration form.

E1 Long-Term Respiratory Complications in Brain Injury

Sahar Albaroudi, MD (H)

Patients with brain injury may present with various pulmonary involvement. These may affect the morbidity and mortality significantly. The aim of this presentation is to review the major pulmonary complications associated with brain injury; their etiology, clinical manifestation, and treatment. The treatment portion would focus on airway clearance and mechanical ventilation techniques.

E2 Caregiver Involvement in Brain Injury Recovery during the COVID-19 Pandemic

Christine Wang, MD (A)

Active family and/or caregiver involvement in the care of a brain injury patient is essential during the recovery process. The effects of the COVID-19 pandemic have made this difficult, particularly during interactions in the healthcare setting. This presentation will explore the difficulties created by social-distancing COVID-19 visitation restrictions, and discuss how we can mitigate the adverse effects on brain injury recovery.

E3 Supported Decision Making for the Person Living with a Brain Injury - Breaking Through Steve Elville, JD, LLM (A)

Supported Decision Making involves persons with disabilities being able to make their own decisions to whatever extent they can, provided that they have enough support to do so. Although not yet law in Maryland, Supported Decision Making is now law in nearly half of the U.S. SDM could represent a huge breakthrough for persons living with brain injuries, as it does not take away their rights of self-determination; rather, it allows them to appoint a supported decision maker, even if they are under guardianship. In this workshop, Stephen Elville will explore Supported Decision Making and its possibilities for persons who have suffered a traumatic brain injury.

E4 Workplace Assistive Technology Assessment Process

Justin Creamer, ATP, COEE, CASp, CRESp (A)

This presentation will explore Assistive Technology in the Workplace, focusing on the process of assessing for and identifying appropriate technologies related to job function and resources for identifying and finding Assistive Technologies to meet functional limitations.

E5 The Effect of Trauma on Brain Development

Meg DePasquale, LCSW-C, DSW (A)

People with developmental disabilities and/or traumatic brain injuries experience mental health issues as a result of physical, emotional and sexual abuse and neglect in greater numbers than the general public. Behaviors are often mistaken as non-compliance, manipulative, and attention-seeking when in actuality they may be a response to earlier experiences of trauma. Through understanding the neurobiology of trauma, participants will begin to reshape their view of behaviors and develop a toolbox of evidenced-based strategies to effectively support those in their care.

E6 Agitation Following Acute Traumatic Brain Injury Karen McQuillan, MS, RN, CNS-BC, CCRN, CNRN, TCRN, FAAN (A)

Agitation is prevalent among patients recovering from moderate or severe traumatic brain injury (TBI). Patients with agitation have a greater likelihood of restraint and sitter use, falls, tube and line removal, causing injury to healthcare staff, longer length of stay, and poorer post-discharge functional outcomes. Instruments commonly used to measure agitation, offer only a crude method of measurement whereas the Agitation Behavior Scale (ABS), a valid, reliable tool for measuring agitation in patients with TBI, offers a detailed description of agitated behaviors. Use of such a standardized tool allows nurses to quantify the severity of the agitation, effectively communicate the extent of agitation to others on the healthcare team and determine treatment effectiveness. A standardized approach that most effectively manages agitation has not been well defined. Nonpharmacologic interventions, ruling out and treating other physiologic causes of agitation and pharmacologic agents are often used to treat agitation following TBI. This lecture will explore the prevalence and risk factors of agitation, as well as assessment tools and interventions that may be considered to best manage agitation following acute TBI.

12:30 pm - 1:30 pm **LUNCH**

SILENT AUCTION CLOSES AT 1:15 PM

Friday's schedule continues on the next page.



Please choose only one session and make your selection for the appropriate course on the online registration form.

F1 Brain Injury 101

Najah Britton, MHA (A)

Brain Injury 101, brought to you by the Brain Injury Association of Maryland, explains different types of brain injury. Brain Injury 101 discusses possible physical, emotional, and cognitive changes that can happen after a brain injury. Learn about executive function and how it may be altered after a brain injury. In Brain Injury 101 one can gain skills in how to accommodate and use compensatory strategies that can be used by professionals, caregivers, and brain injury survivors.

F2 What are Equine Assisted Activities and Therapies (EAAT)?

Paige Clark, BS; Alia Mortensen, BS (A)

What are Equine Assisted Activities and Therapies (EAAT)? Great and Small Therapeutic Riding is proud to share the wonder of EAAT with you. Learn more about the healing power of the horse and the physical, social, and emotional benefits horses can have on participants of all abilities. We will discuss different types of EAAT, the benefits of EAAT for a large array of participants, and what it takes to offer EAAT services.

F3 Trauma informed care and the caregiver: What is it and how the heck to I help? Meg DePasquale, LCSW-C, DSW (A)

Traumatic events are common and can have lasting effects on a person's life and health and a community's well-being. The effects of trauma go far beyond its immediate psychological and physical effects. It is also very common among individuals with intellectual and developmental disabilities (IDD). Experiencing trauma can alter individual biology and behavior over the life course; these changes have an impact on interpersonal and intergenerational relationships. In order to provide well-rounded and person centered care, effectively addressing the impact of trauma is critical.

F4 Fellow Travelers, Common Behavioral Health Conditions-Signs, Symptoms and Resources for the Brain Injury Community. Anastasia Edmonston, MS, CRC (A)

Behavioral health conditions such as depression, anxiety and substance use impact people across the lifespan. Individuals living with a brain injury are also vulnerable to either experiencing the onset of behavioral health disorder(s) or an exacerbation of a pre-existing behavioral health disorder. This session will provide an overview of signs and symptoms of common behavioral health disorders and resources available to all of us for support and treatment.

F5 ABLE Accounts: A Financial Tool to Promote Health, Independence and A Better Quality of Life for People with Disabilities Kelly Nelson, MS (A)

ABLE accounts can help enhance quality of life and build self-reliance by targeting barriers to economic stability experienced by brain injury survivors as it offers qualifying individuals a way to save and invest personal funds in a tax-advantaged account without losing vital means tested benefits such as SSI, Medicaid, HUD, food and energy assistance.

F6 The Domestic Violence-Related Traumatic Brain Injury Silent and Unrecognized Pandemic

(A)

Maria Garay-Serratos, MSW, Ph.D.

Have you ever thought about the correlation between domestic violence (DV) and traumatic brain injury (TBI)? The presenter will share her personal DV-related TBI journey as she came to realize her mother and father were suffering from DV-related TBI and how this journey led to her life's mission to raise awareness and advocate for the allocation of resources and research and development of treatments aimed at addressing the DV-related TBI silent pandemic.

2:30 pm – 2:45 pm **BREAK/EXHIBITORS**

2:45 am – 4:00 pm CLOSING KEYNOTE

Stronger than you Believe

Eric Washington, BS

This presentation is Eric's personal story of dealing with the aftermath sustaining a brain injury. The journey begins at the place of accident and continues through the early hospital days to the challenges of finding rehab to the maze of decisions that had to be made to craft solutions. The journey has not ended but continues with showing the ongoing challenges of this complex situation.

4:00 pm – 4:30 pm Closing Remarks/Drawing Winners Announced



Keynote Speakers

Opening Keynote Speaker on Thursday, May 12, 2022



Geoffrey T. Manley, MD, PhD is the Chief of Neurosurgery at Zuckerberg San Francisco General Hospital (ZSFG) where he co-directs the UCSF Brain and Spinal Injury Center and is Professor and Vice Chairman of Neurosurgery at the University of California, San Francisco (UCSF). Dr. Manley is an internationally recognized expert in neurotrauma. In addition to a robust clinical practice at ZSFG, San Francisco and the Greater Bay Area's level 1 trauma center, he coordinates and leads national and international clinical research efforts in the study of the short- and long-term effects of traumatic brain injury (TBI). Building on the success of the seminal, national longitudinal study, TRACK-TBI, Geoff, as Contact Principal Investigator, along with a nationwide team of TBI experts, has recently launched the TRACK-TBI NETWORK, an innovative, precision-medicine driven consortium that will test Phase 2 drugs for TBI. The TRACK-TBI studies have created a modern precision medicine information common for TBI that integrates clinical, imaging, proteomic, genomic, and outcome biomarkers to drive the development of a new TBI disease classification system, which could revolutionize diagnosis, direct patient-specific treatment, and improve outcomes. His nearly 300 published manuscripts reflect a wide range of research interests from molecular aspects of brain injury to the clinical care of TBI. He sits on the National Academies of Science, Engineering and Medicine's Committee on VA Examinations for Traumatic Brain Injury and has served as a consultant for the Prehospital Guidelines Committee for the World Health Organization and on numerous clinical research committees for the National Institutes of Health, Centers for Disease Control, and Department of Defense

Closing Keynote Speaker on Thursday, May 12, 2022



Martin Kerrigan sustained a traumatic brain injury in 1998. After his TBI Martin became a special education teacher. Martin received both his master's and Educational Specialist degrees in Special Education with an Emphasis in Acquired Brain Injury from George Washington University. He currently sits on the Maryland Traumatic Brain Injury Advisory Board where he has serves in the role of chairperson. Martin regularly presents on brain injury topics including working with students with brain injury and brain injury and substance abuse. He also facilitates a weekly support group for individuals with co-occurring brain injury and substance abuse issues. Martin has also worked with individuals with brain injuries helping them figure out their new way of life.

Opening Keynote Speaker on Friday, May 13, 2022



Ms. Katherine M. Lee, MS, CRNP, ANP-BC, currently serves as the Director of Casualty Management Policy & Programs and is the lead for the US DoD Warfighter Brain Health program supporting the Deputy Assistant Secretary of Defense for Health Readiness Policy and Oversight. She brings considerable clinical, educational and research experience in the field of neuroscience and neurotrauma to include more than 200 regional, national and international presentations and more than 30 peer-reviewed publications. Ms. Lee has served in a variety of leadership, advisory and operational roles in the US Department of the Army and US Department of Defense for over 15 years; including the Assistant Chief of the Defense and Veterans Brain Injury Center (DVBIC), Deputy Director for the Defense Centers of Excellence for Psychological Health and Traumatic Brain Injury; Deputy Director for the Clinical and Educational Affairs Office for DVBIC and the manager of the Office of Clinical Standards at DVBIC. Prior to working in Washington DC, Ms. Lee worked in 2 academic/level I trauma centers as a nurse practitioner/clinical care coordinator at the University of Louisville Hospital: and clinical research coordinator in the Division of Neurosurgery at the Medical College of Virginia Hospitals/Virginia Commonwealth University. Ms. Lee holds both bachelor's and master's degrees in nursing from Virginia Tech University. She has earned the following certification: Adult Nurse Practitioner (ANP) through the American Nurses Credentialing Center



Closing Keynote Speaker on Friday, May 13, 2022

Eric Washington sustained a concussion and a spinal cord injury while playing football for the University of Kansas. After recovering from his injury, he graduated with a bachelor's degree in Applied Behavioral Sciences. Today, he is a passionate advocate for TBI survivors of color, and TBI survivors who are homeless. Eric has also served as a faculty member on the NCAPPS Brain Injury Learning Collaborative and was instrumental in supporting brain injury survivor groups in Colorado.



The Brain Injury Association of Maryland (BIAMD) Annual Conference has lots to offer . . .

Quiet Space

For those who need to get away from the hustle and bustle of the conference, silent auction, and other activities, "Quiet Space" will be available. Signs will be posted to direct you to the "Quiet Space." You may also ask for assistance at the conference registration table.

The Silent Auction

- ★ A conference favorite, join in the fun of bidding at the **Silent Auction!**
- ★ Items available for bidding include:
 - Hotel overnight stays
 - Gift certificates to restaurants and museums
 - Sports memorabilia
 - Original art and posters
 - Jewelry and clothing

And so much more . . .

- ★ Tickets will be sold for the 50/50 raffle!
- ★ Information about support groups and outreach councils
- ★ A variety of information and resources about brain injury

CONFERENCE SESSION HANDOUTS

BIAMD is going GREEN! If they have been provided by the speakers, electronic files of session handouts will be available, for download from www.BIAMD.org.

Please download and print these materials if you wish to have them during conference sessions.

Handouts will NOT be available at the conference.



MEMBERSHIP

Each year, the Brain Injury Association of Maryland (BIAMD) helps thousands of individuals and families who have been affected by brain injury. Our programs of education, support, advocacy, and recreation are offered for persons with brain injury, their families, caregivers, healthcare professionals, and communities throughout Maryland. Your membership matters. Together, we can create better futures for survivors of brain injury and their families. Your membership will make a difference for all Marylanders living with brain injury and for you.

Join online at the same time you register for the Conference online and get the reduced member pricing for the conference PLUS your year-long membership benefits.

Benefits of your BIAMD membership include:

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- Knowledge that you are helping to create a better future for survivors of brain injury



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Dr. Peters

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Dr. Carlson

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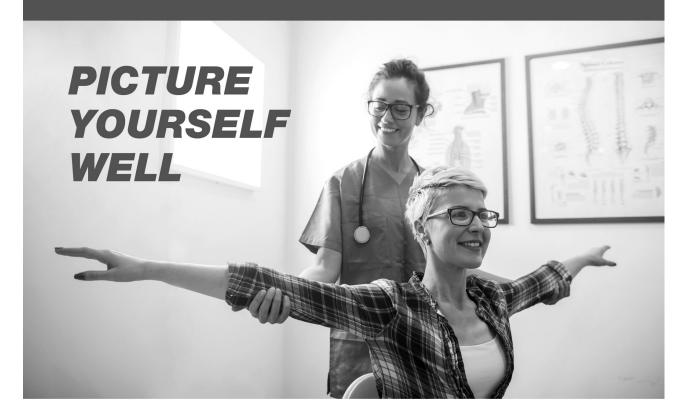






The Brain Injury Programs at LifeBridge Health

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The Brain Injury Programs at LifeBridge Health provide a full continuum of neurorehabilitation services to persons recovering from acquired brain injury. The programs are designed to help restore individuals to their maximum level of thinking, physical, emotional and behavioral abilities. Our seasoned physiatrists, neurologists and certified brain injury specialists work in partnership to produce outstanding outcomes and high consumer satisfaction across three outstanding facilities.

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RESTORE! Inpatient Program at the Friedman Neurological Center

RETURN! Brain Injury Community Re-entry Program

RETURN! TO WORK Vocational Re-entry Program

Mild Brain Injury Program



For more information about our programs or to schedule an appointment, please contact Mark Huslage at 410-601-0787.

Visit our website at lifebridgehealth.org/Main/BrainInjuryProgramsatLifeBridgeHealth





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The Center for Brain Injury Recovery at Kennedy Krieger Institute is a leading research institution offering comprehensive brain injury care, from concussion to severe brain injury, including inpatient and outpatient services.

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- Brain injury and harm reduction strategies
- Brain injury and substance use for public health professionals and administrators
- Behavioral health, brain injury and suicide
- Trauma and brain injury through a person centered lens
- Brain injury and intimate partner violence
- Peer support
- Crisis management and de-escalation, tools for law enforcement and first responders
- Opioids and brain injury facts for individuals and families, public health and substance use professionals



Learn more: bit.ly/MDHBrainInjury





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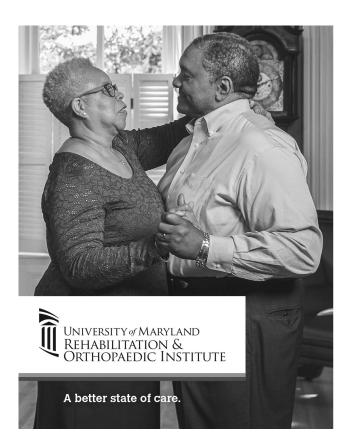


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Susan M. Hahn, PCC, CPDC















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