



DEFENSE CENTERS OF EXCELLENCE

For Psychological Health & Traumatic Brain Injury

Coaching Student Veterans and Service Members with Traumatic Brain Injury

Sept. 11, 2013, 1-2:30 p.m. (EDT)

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This webinar has been approved for the following:

- 1.5 AMA PRA Category 1 Credits™
- 1.5 Credits by the American Psychological Association
- 1.5 Nursing contact hours as a co-provider with the American Nurses Credentialing Center
- 1.75 CE Contact hours for Physical Therapist and Assistant approved by the State of Illinois
- 1.75 CE Contact hours for Occupational Therapist and Assistant approved by the State of Illinois
- 1.5 CEHs for Social Work approved by the Missouri Division of Professional Registration Committee for Social Work

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Continuing Education Credit

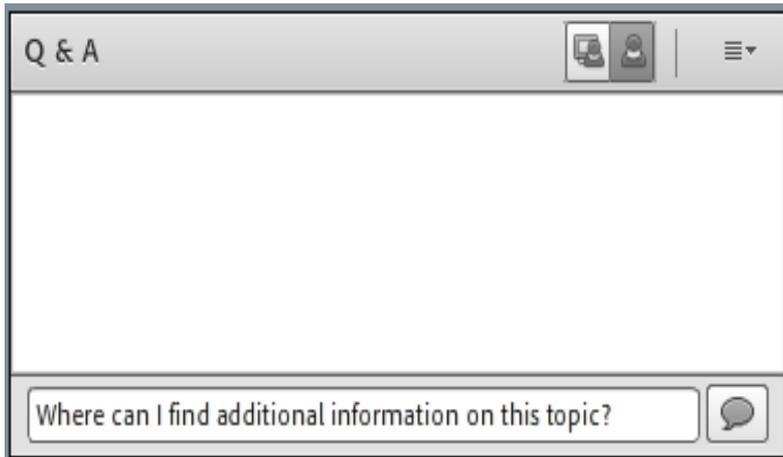
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- If you meet the eligibility requirements and pre-registered on or before 11:59 p.m. EDT on September 8, 2013, please visit conf.swankhealth.com/dvbic to complete the online CE evaluation and download your CE certificate.
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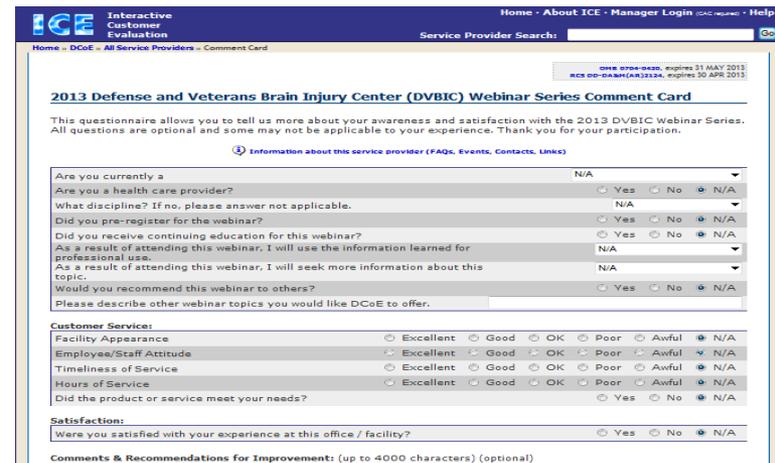
Additional Webinar Details

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The screenshot shows a Q&A interface. At the top left, it says "Q & A". To the right of the text are icons for a printer, a person, and a menu. Below the text is a large empty white box for entering questions. At the bottom of the box is a text input field containing the placeholder text "Where can I find additional information on this topic?" and a speech bubble icon to its right.

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- The question box is monitored during the webinar, and questions will be forwarded to our presenters for response during the question-and-answer period.
- The presenters will respond to as many questions as time permits.

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U.S. 800-857-1133

Participant Passcode: DCOE

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Webinar Topic Overview

- Student veterans and service members with traumatic brain injury (TBI) experience unique challenges as they navigate college and community life.
- Participants will learn about “dynamic coaching” in which clinicians act as coaches who model and instruct clients to use self-regulation.
- Coaching occurs within three evidence-based domains or areas of need: self-learning, self-organizing and self-advocacy. In these domains, participants will learn how to collaborate with clients to identify goals, create plans, select strategies, track performance and make adjustments.
- Speakers will emphasize coaching that prepares clients to attend college and supports them while they are there. Participants also will learn to use goal attainment scaling to create person-centered outcomes.
- Additional resources will be provided for clinicians working with student veterans and service members with TBI.

Speaker



Dr. Kennedy has many years of clinical and research experience with young adults with executive dysfunction after brain injury. She has published on topics related to executive dysfunction, metacognition and self-regulation, and works nationally and locally as an advocate for individuals with cognitive disabilities. Additionally, she has chaired and/or worked with several professional groups who review the cognitive rehabilitation therapy evidence and create evidence-based practice guidelines. Currently, she conducts outcomes and intervention research with college students with brain injury using a dynamic coaching model and runs the NeuroCognitive-Communication Lab with graduate students (www.neurocognitivelab.com).

Mary R.T. Kennedy, Ph.D., CCC-SLP
Associate Professor & Director,
College Program for Students
with Brain Injury,
University of Minnesota

Speaker



Don MacLennan has provided cognitive rehabilitation across the continuum of care to veterans and active-duty service members for more than 30 years. He is a member of the Minneapolis VA Health Care System's Polytrauma Transitional Rehabilitation Team. The team helps veterans and service members make the transition back to school and work.

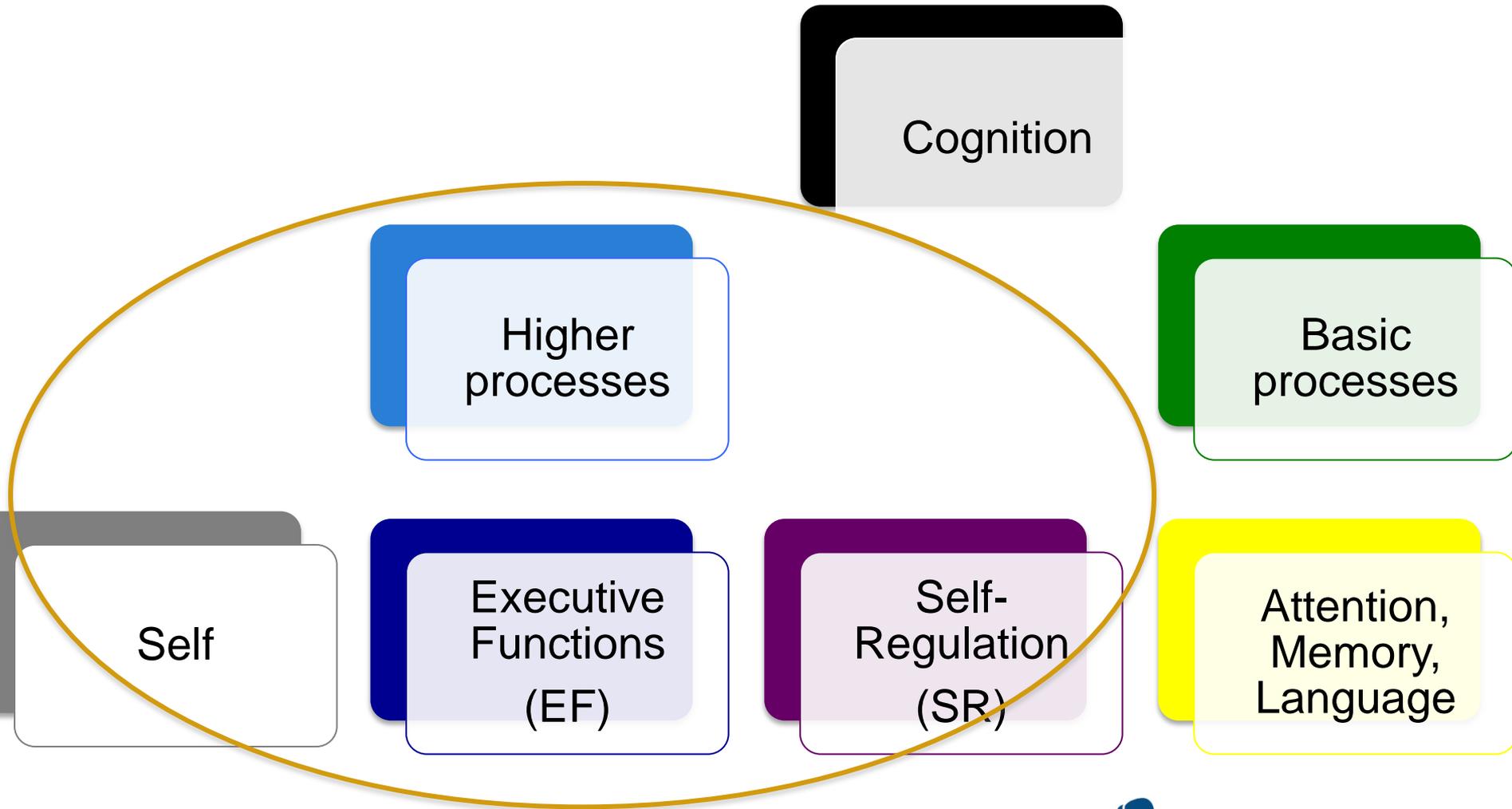
Don MacLennan, MA, CCC-SLP
Chief, Speech Pathology Section,
Minneapolis VA Health Care
System

Disclaimer

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We do not have a relevant financial relationship to disclose, and we do not intend to discuss an off-label/investigative use of a commercial product.

Cognition



Executive Functions (E.F.) Definition

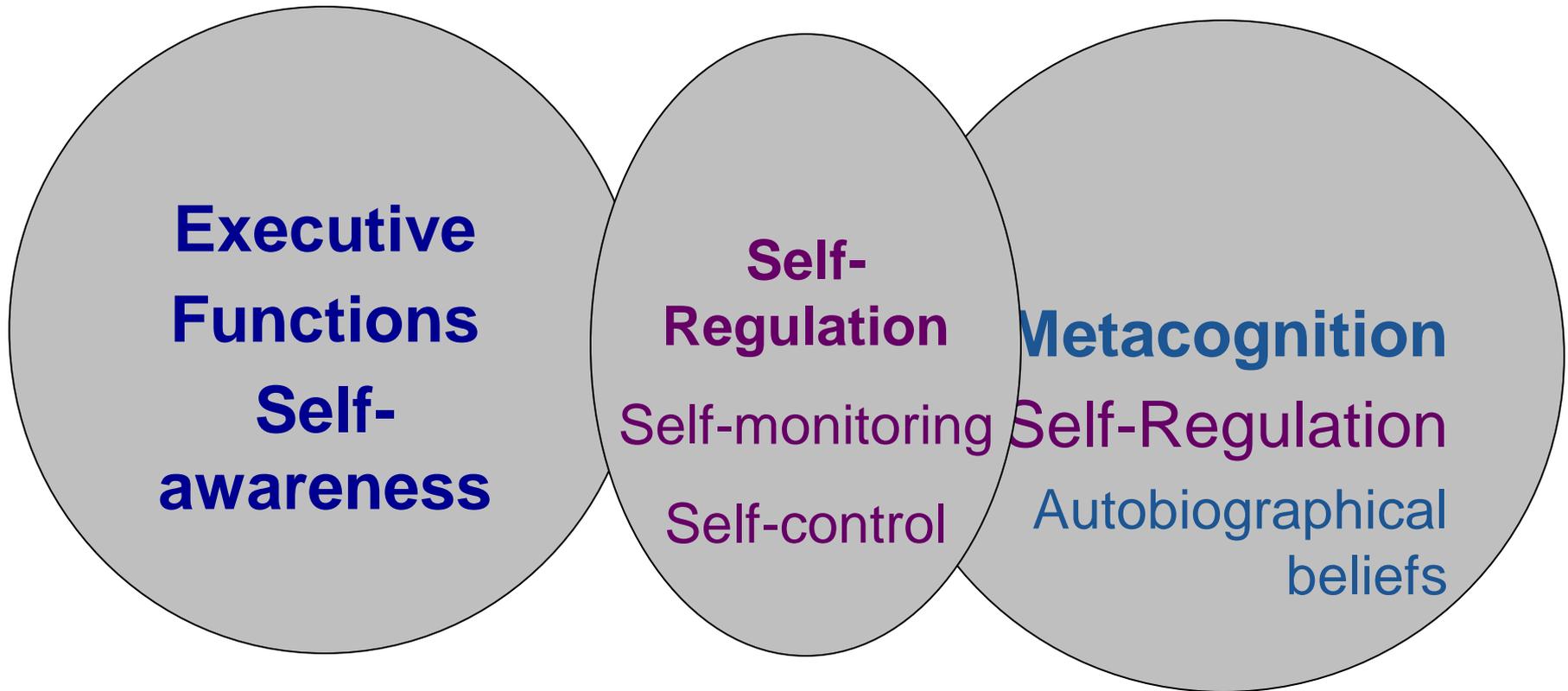
Integrative cognitive processes that determine goal-directed and purposeful behavior in daily life

- formulate goals;
- initiate behavior;
- anticipate the consequences of actions;
- plan and organize behavior in logical sequences
- **“to monitor and adapt behavior to fit a particular task or context.”**

Cicerone et al., 2000

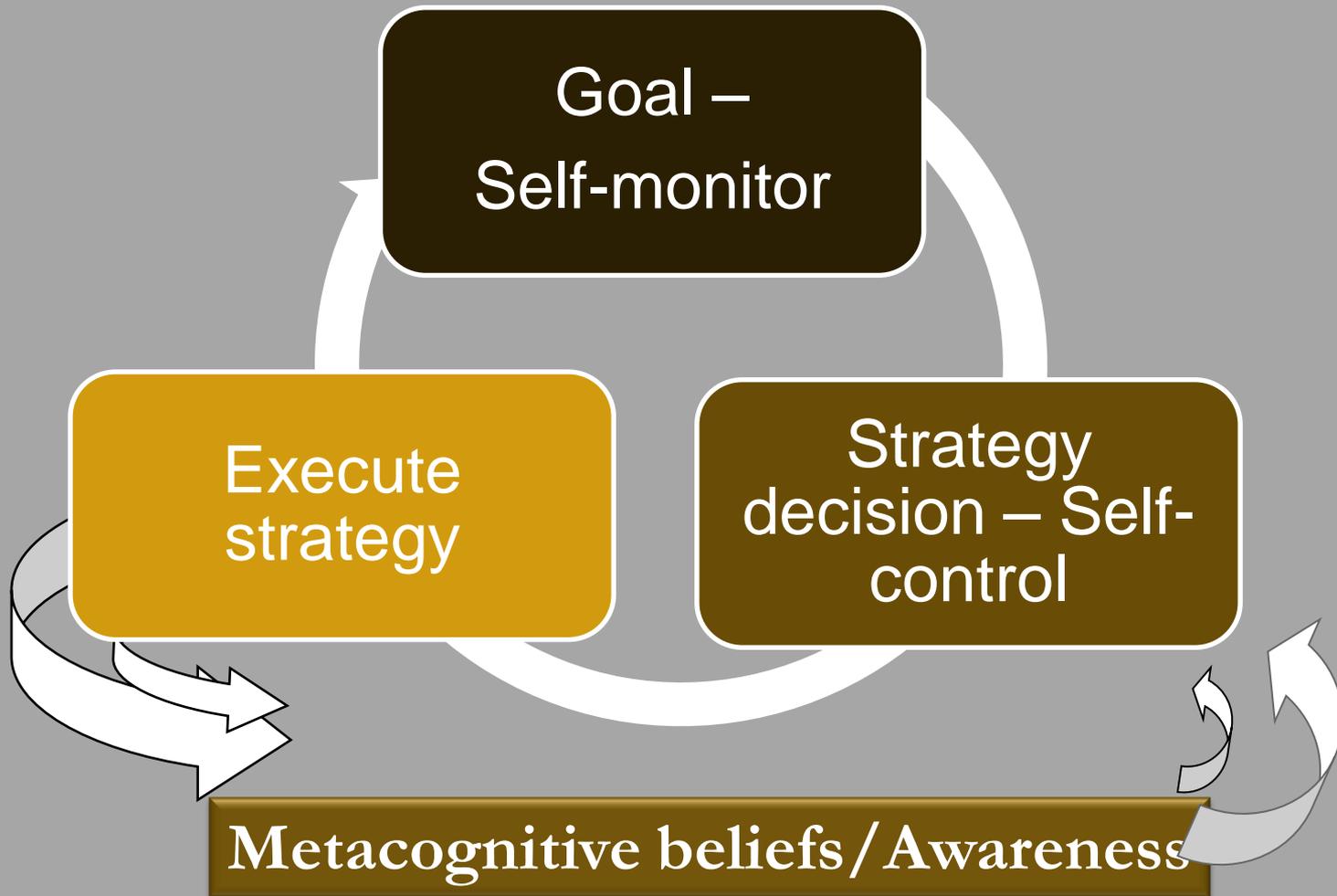
Rehabilitation, Neuropsychology

Other Fields of Psychology



Self-Regulation

(revised, Kennedy and Coelho, 2005)



Self-Regulation is Central to E. F.

- *Self-regulation* allows “individuals to guide their goal-directed activities over time, including the modulation of affect, cognition, and behavior. It reflects goal-oriented behavior and includes multiple processes operating in concert (Karoly, 1993, Sitzman & Ely, 2011).

Self-Regulation is Required for Reintegration into Home, School, and Work

- Solve problems
- Adapt to change
- Be organized
- Engage in formal and informal learning or training

Instruct in Self-Regulation Processes

- The lesson learned from studies of transfer is that, if you want people to learn something, teach it to them. Don't teach something else and expect them to figure out what you really want them to do (Detterman, 1993).
- “What you do with what you have is more important than what you have.” Mark Ylvisaker (1953 – 2009)

What is Dynamic Coaching?

- Dynamic, collaborative approach that models and explicitly instructs **self-regulation** as a process, a way of thinking
 - (Ylvisaker and Feeney, 1998)
 - Ylvisaker (2006) Self-coaching: A context-sensitive, person-centered approach to social communication after TBI, *Brain Impairment*, 7 (3), 246-258.
- Based on reciprocal adjusting and problem solving between the **client-coach**
- In context (campus, work, home) in real time, with constant feedback
- Long-term goal – for clients to become their own experts

Traditional Therapy

- Educate
- Clinician as expert
- Rely heavily on test scores, behavior
- Clinician identifies and instructs strategies
- Clinician provides structure and content
- Product based goals
- Occurs in and out of context
- More intensive, e.g. 2-3 times weekly

Dynamic Coaching

- Educate
- Client and clinician-coach are experts
- Rely heavily on interview data, behavior
- Clinician asks questions, guides solutions, and instructs in mutually agreeable strategies
- Clinician provides structure for SR process, client provides content
- Processed based goals
- Occurs in context, in “real time”
- Less intensive, e.g. once weekly

Research Basis of Dynamic Coaching

- Self-regulated learning in work and school
- Instructional methods for individuals with brain injury
- Factors that contribute to PSE and vocational success
- Practical experience working with college students with TBI

Polling Question # 1

Q1. Dynamic coaching consists of:

- A) Both the client and clinician-coach are experts
- B) Rely heavily on the interview, behavior
- C) Less intensive (e.g., once weekly)
- D) All of the above

Self-regulated Learning in Work and Education

Meta-analysis = four aspects of SR had the strongest effects on learning in education and work

1. Goal level
2. Persistence
3. Effort
4. Self-efficacy

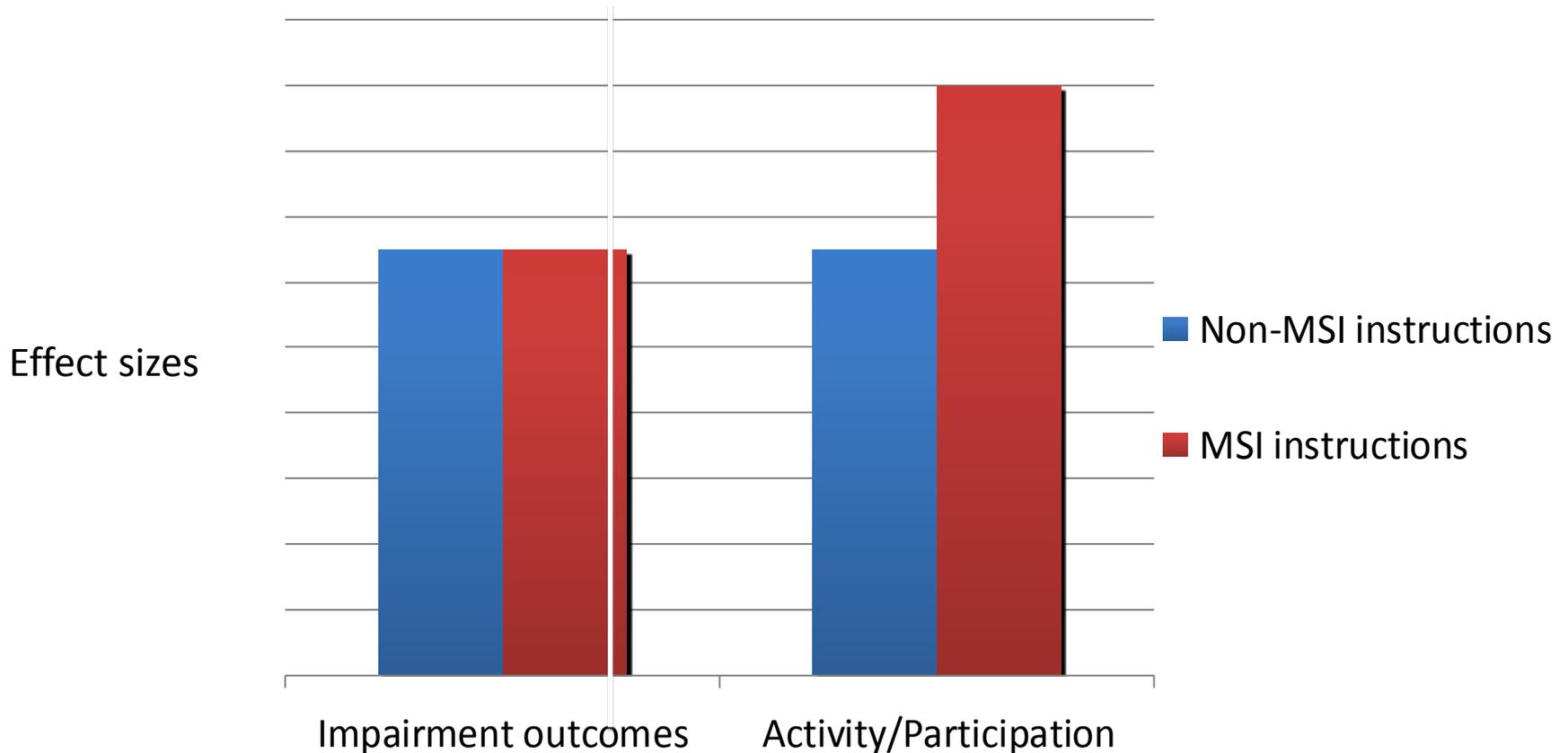
(Sitzman and Ely, 2011, Psychological Bulletin, 137, 3, 421–442)

Instructional Methods are Effective When...

- Functional, person centered goals generated collaboratively
- Metacognitive strategy and direct instruction used to teach/use strategies
 - Strategy decisions ARE based on self-assessments
 - Benefit from feedback
- Become effortless routines/procedures
- Practice should be distributed naturally

(Ehlhardt et al., 2008; Institute of Medicine, 2011; Kennedy & Krause, 2011; Kennedy et al., 2008; Sohlberg et al., 2005; Sohlberg & Turkstra, 2011; Swanson, et al., 1999)

Metacognitive Strategy Instructions Achieve the Best Functional Outcomes



Kennedy et al., 2008

Factors that Contribute to PSE & Vocational Success

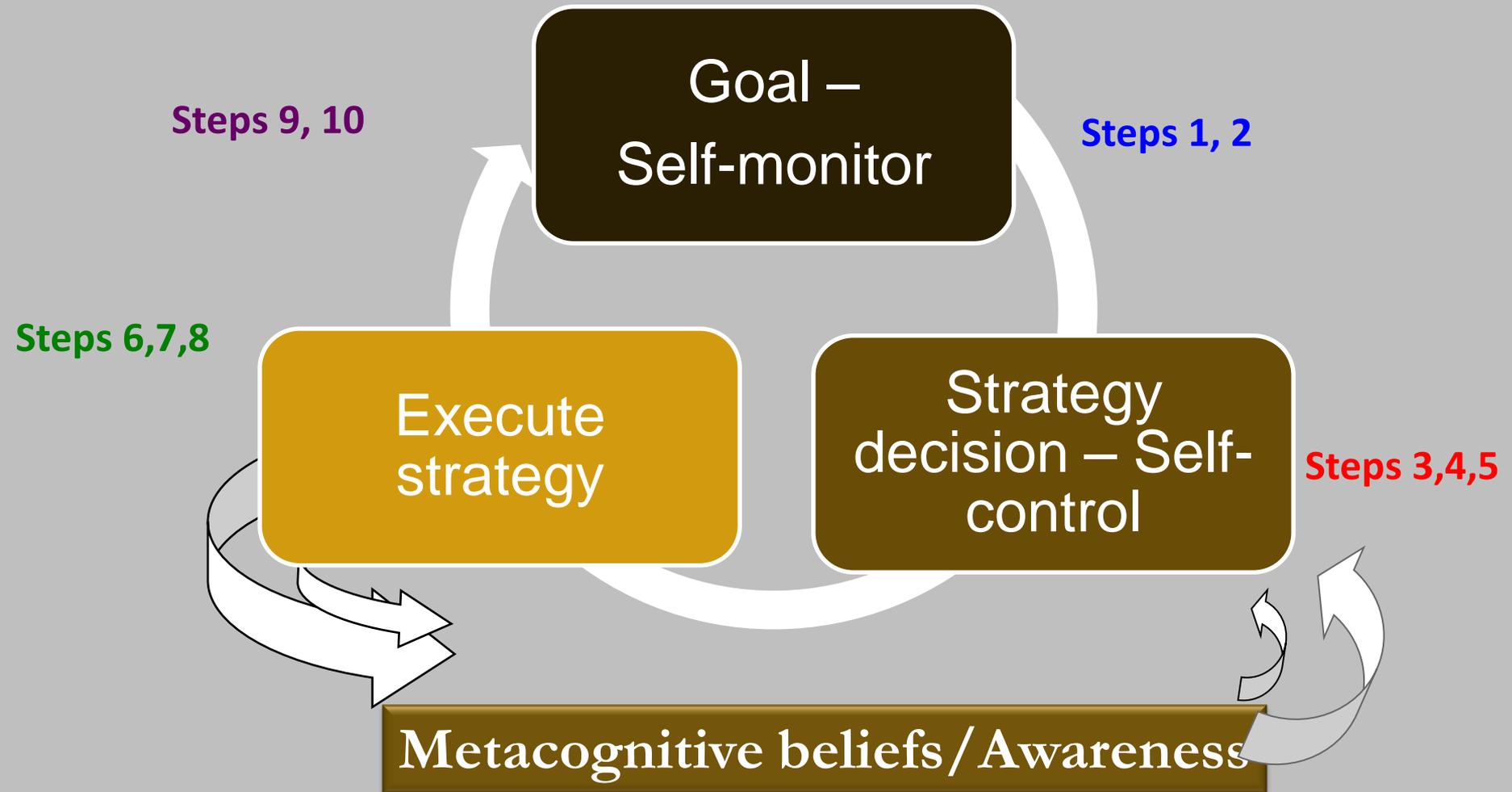
- Persistence and resiliency
- Focus on process/steps, not just the end goal
 - Pham & Taylor (1999) – focus on process results reaching end goal
AND ↓ stress
- Reasonable accommodations
- Universal design

Our Experience with Dynamic Coaching

- **Coaching college students with TBI**
 - Ongoing research and contract with MN Vocational Rehabilitation Services (DEED)
- **Goal – students become experts**
 - SR processes are explicitly instructed and modeled with metacognitive strategies and procedures
- **On campus, at work/home, in real time, with constant feedback from various sources**

Self-Regulation

(Revised, Kennedy & Coelho, 2005)



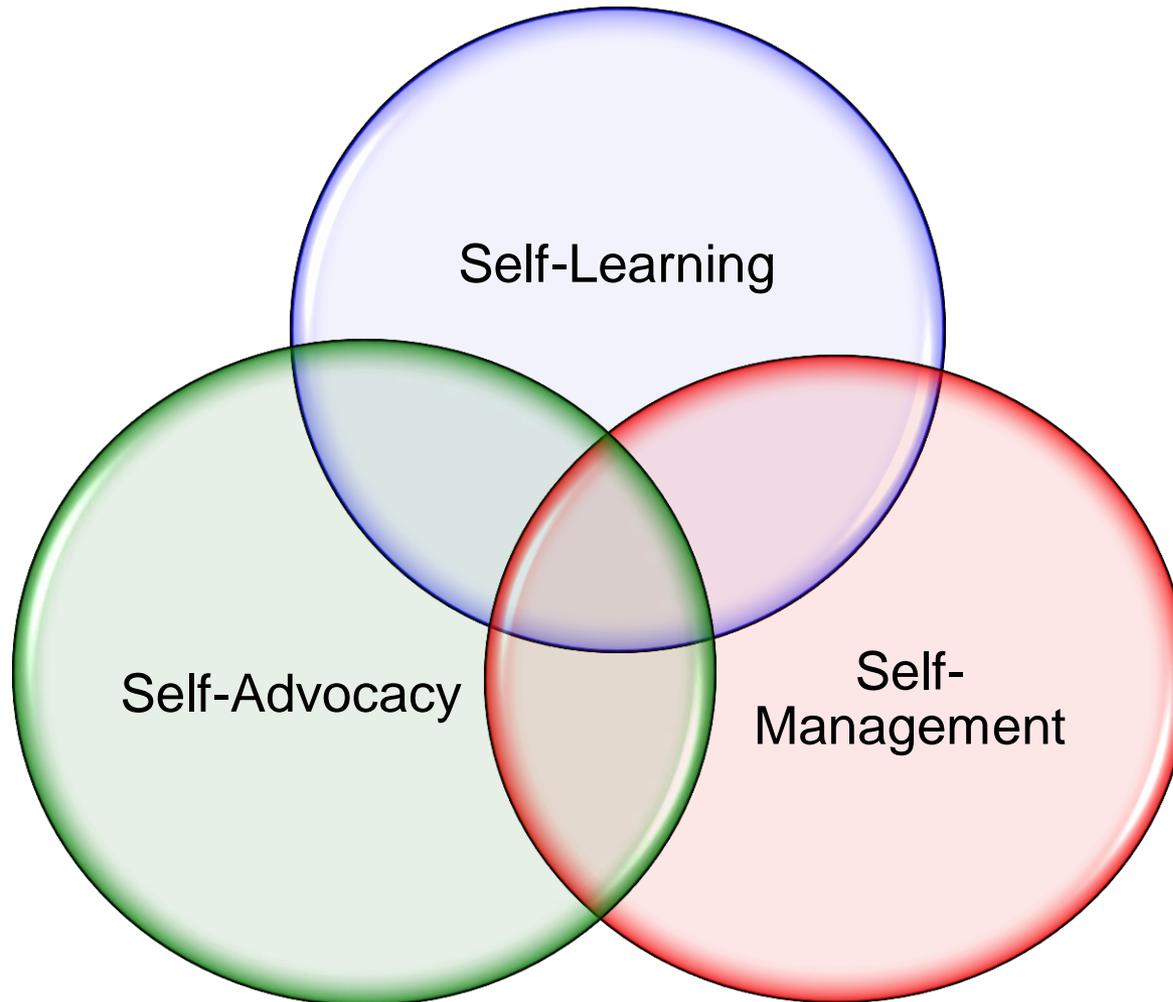
Self-Regulation for Complex Activities

- ① Identify potential goals
- ② Select doable goal
- ③ Identify potential strategies, solutions
- ④ Select optimal strategy, vs. have backup
- ⑤ Create steps, materials
- ⑥ Initiate strategy steps
- ⑦ Check: track strategy use
- ⑧ Check: track performance
- ⑨ Compare to goal, review
- ⑩ Adjust goal and/or adjust strategy

Repeat....

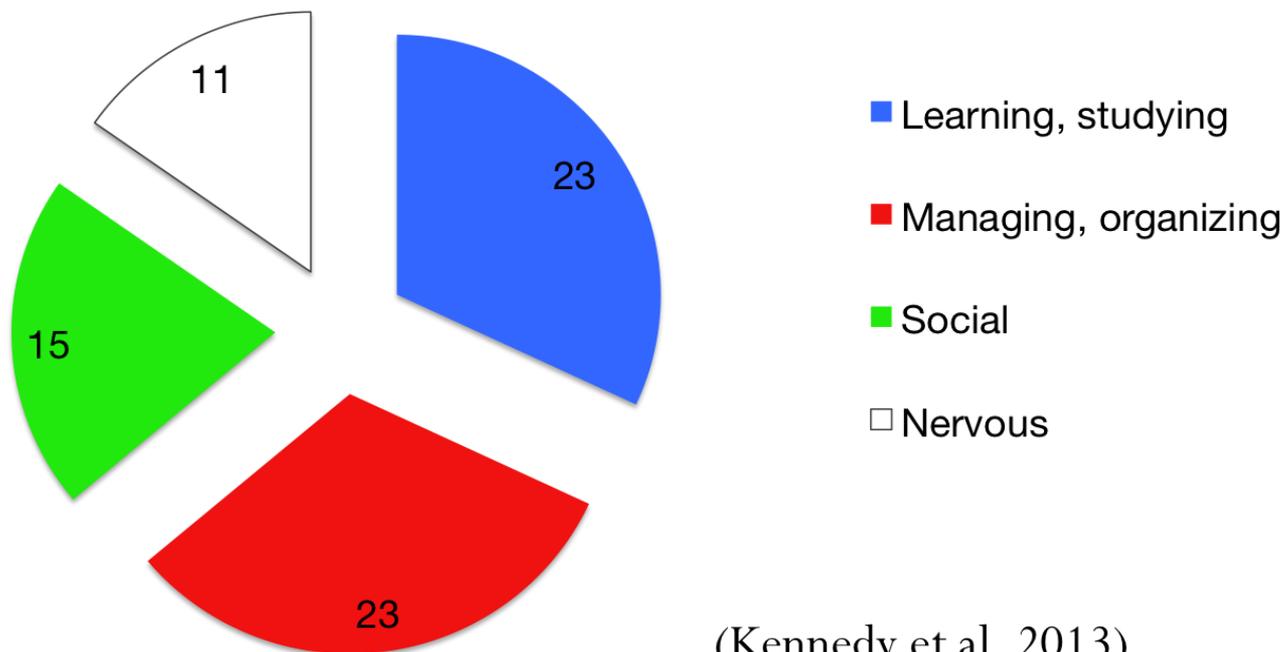
Three Primary Domains

(Kennedy & Krause, 2010; 2011; Kennedy et al., 2013)



Thirteen College Experiences after TBI using the College Survey for Students with Brain Injury (CSS-BI)

Percent Explained

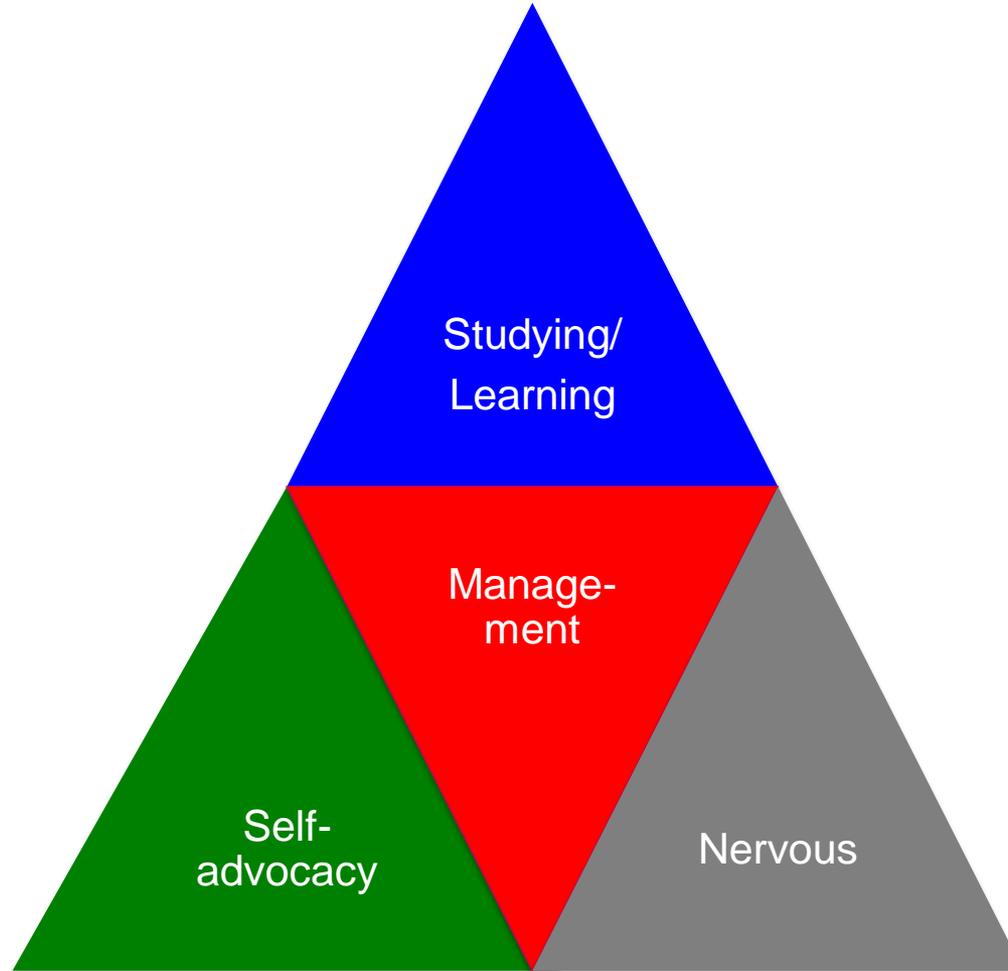


(Kennedy et al. 2013)



Coaching: Management as a Core Skill

(Kennedy & O'Brien, 2013)



College Simulation

- **Serves as a bridge between hospital and school**
 - Identifies cognitive challenges that may be underestimated by neuropsychological testing
 - Facilitates awareness of weaknesses and strengths
 - Facilitates development of strategies, and assistive technology to support organization, concentration, learning
 - Identify effective academic accommodations before entering college
 - Evaluate programs and apply to schools

Coaching Approach to College Simulation

- Discover a need
- Develop a goal
- Identify and rehearse a strategy
- Implement strategy
- Self-monitor performance
- Evaluate effectiveness
- **Collaborative process**

Polling Question # 2

Q2. When coaching, which core skill should students possess?

- A) Self-advocacy
- B) Studying/learning
- C) Management
- D) None of the above

Polling Question # 3

- **True or False.** Advantages of college simulation activities include identifying cognitive challenges not found on neuropsychological testing, facilitating strategy development and assistive technology to support core skills, and identifying appropriate academic accommodations before entering college.

Examples:

- **Judgment of learning**
- **Efficiency of learning**

Discovering a Need: Learning

- **Hypothesis:**
 - How well will you do on a test after:
 - Listening to two lectures at slow pace
 - Allowed ample time to study
- **Test**
 - Multiple-choice (recognition memory)
 - **May do fairly well**
 - Short answer (recall memory)
 - **Often do poorly**

Developing a Goal: Learning

- **Results for young active duty service member:**
 - Multiple choice questions: 65%
 - Short answer questions: 32%
- **“How did this happen? I knew this 10 minutes ago.”**
- **Individual Goal: Will study notes and receive a score of at least 85% on a test of the material.**

Identify and Rehearse a Strategy: Judgment of Learning

- **“How did this happen, I knew this ten minutes ago?”**
 - Method of study, “I looked at my notes once a day”
 - What worked? – good notes; consistent time to study
 - What didn’t work – “well obviously the information didn’t stick”
 - Could not retrieve information he thought he knew after delay
- **Judgment of learning**
 - Evaluating learning while studying notes: information is in Short Term Memory
 - Evaluating learning after a **delay**: Information is in Long Term Memory

Identify & Rehearse a Strategy: Key Word Approach

Thiede, Anderson, and Therriault, 2003)

- Place key words related to larger concepts to the left of where the information occurs in the notes.
- Check learning after a delay by
 - Covering the notes
 - Retrieving relevant information by reading only the key word
- **Strategy Goal:** Will use key word approach to reliably distinguish between learned and unlearned information in notes and self-evaluate its effectiveness for accurately judging learned information

Identify & Rehearse Strategy: Key Word Strategy

<p>Epidemiology</p>	<p>Study of how widespread a condition is</p>	
<p>Incidence</p>	<p>Incidence – measures rate of occurrence 3 factors -Total number of new cases -In a specific location -Over a specific period of time</p>	<p>1.7 million in U.S. every year</p>
<p>Prevalence</p>	<p>Prevalence – measures total occurrence 2 factors -Total number of cases (old + new) -In a specific location</p>	<p>5,300,000 with TBI & disability in the U.S.</p>

Plan-Do-Review

Individual Goal: Study notes and get score of at least 85% on test
Strategy Goal: Both use and evaluate the key word approach

Plan	Do	Review
Use key word strategy		Met goal
Estimated time to study: 1 hour	Actual time to study: 3.5 hours	Budget more time Explore learning strategies

Discovering a Need: Learning

- **Young, active duty service member with a goal of becoming an aircraft mechanic**
- **Unable to meet criteria on self-study manuals**
 - Scoring less than 50% on unit tests in the manual
 - Required 80% to pass
- **Performance on initial college simulation test**
 - Multiple-choice (recognition memory) – 45%
 - Short answer (recall memory) – 23%

Developing a Goal:

- **Goal defined by aircraft mechanic manuals**
 - Criteria for passing = 80% correct on unit tests
- **Individual Goal: Will pass aircraft mechanic tests with a score of at least 80%**

Identify & Rehearse a Strategy: Spaced Retrieval

- **Difficulty was NOT due to:**
 - Comprehension
 - Judgment of Learning
 - Effort

- **Difficulty WAS due to:**
 - Problems transferring information from STM into LTM

Identify & Rehearse a Strategy: Spaced Retrieval

- **What did you do in High School when you needed to learn difficult information?**
 - I used to rehearse the information over and over and over until I learned it.
- **Why do you think this isn't working for you now?**
 - Information is more technical – lots of numbers
 - So much information that “all the facts blur together and I confuse all the numbers” (memory interference)

Identify & Rehearse Strategy: Spaced Retrieval

- **Spaced Retrieval involves**
 - Rehearse and memorization of a small amount of information
 - Retrieve the information at successively larger intervals over time to consolidate information in LTM
- **Makes use of two effective memory strategies**
 - Repeated rehearsal
 - Distributing rehearsal over time
- **Strategy Goal: Will use spaced retrieval strategy to study unit tests for aircraft mechanics course and self-evaluate its effectiveness for learning**

Identify & Rehearse Strategy: Spaced Retrieval

Created flashcards for questions in each unit

1. Study notecards for 10 minutes
2. Select the cards learned in 10 minute span
 - Minimize interference
3. Use countdown timer to retrieve information at
 - 1 min, 2 min, 4 min, 8 min, 15 min, 30 min, 60 min
4. Review again at end of the day
5. Put in a review stack to review each day

Plan-Do-Review

Individual Goal: Study notes and get score of at least 85% on test
Strategy Goal: Both use and evaluate the space retrieval approach

Plan	Do	Review
Use spaced retrieval		Met goal
Estimated time to study: 5 hours per unit	Actual time to study: (initial study and review time) – 2 hours	Continue strategy

College Simulation

Serves as a bridge between hospital and school

Once a student is on campus – college simulations may be perceived as a step backward.

It is not REAL college work

College Program for Students with Brain Injury

Supporting Students While in College

College Simulation and College Program

College Simulation

- Out of context
 - Slow pace, more time
 - No 'cost'
- Emphasis on teaching strategies
- Instructs in SR process

College Program

- In context
 - Real time
 - Real feedback
 - Cost
- Emphasis on using strategies
- Instructs in SR process

Intake and Evaluation

- **Interview using the College Survey for Students with Brain Injury (CSS-BI, Kennedy and Krause, 2009)**
 - Academic experiences, goals
 - Vocational goals
 - Medical history
 - Academic history
- **Review documentation/medical history of injury, education**
- **Gather neuropsychological and other reports**
 - Supplement testing to determine strengths and weaknesses

Survey & Interviewing procedures: CSS-BI

I have to review material more than I used to.

Agree:

Give example?

How do you review?
Or What do you do to review?

- May need to give example, e.g., highlight?

I don't always understand instructions

Agree:

Give example?

What do you do when you don't understand?

- * May need to give example, e.g., check syllabus, ask peer

I have fewer friends than before

Uncertain:

So you are uncertain about this?

- Yeah well, I don't really have fewer friends, but I have different friends, better friends

Examples of Common Goals

Self-Learning (SL)

Grade based: want to get a B

Process based: Write better papers using keywords

Develop strategies for taking multiple choice tests

Self-Management (SM)

Turn in all my papers on time

Keep up with a long term project using identified steps

Prioritize work, home and college activities

Self-Advocacy (SA)

Discuss my brain injury with my instructor/employer

Find more activities that I can still do with my friends

Request that co-workers accommodate on big project

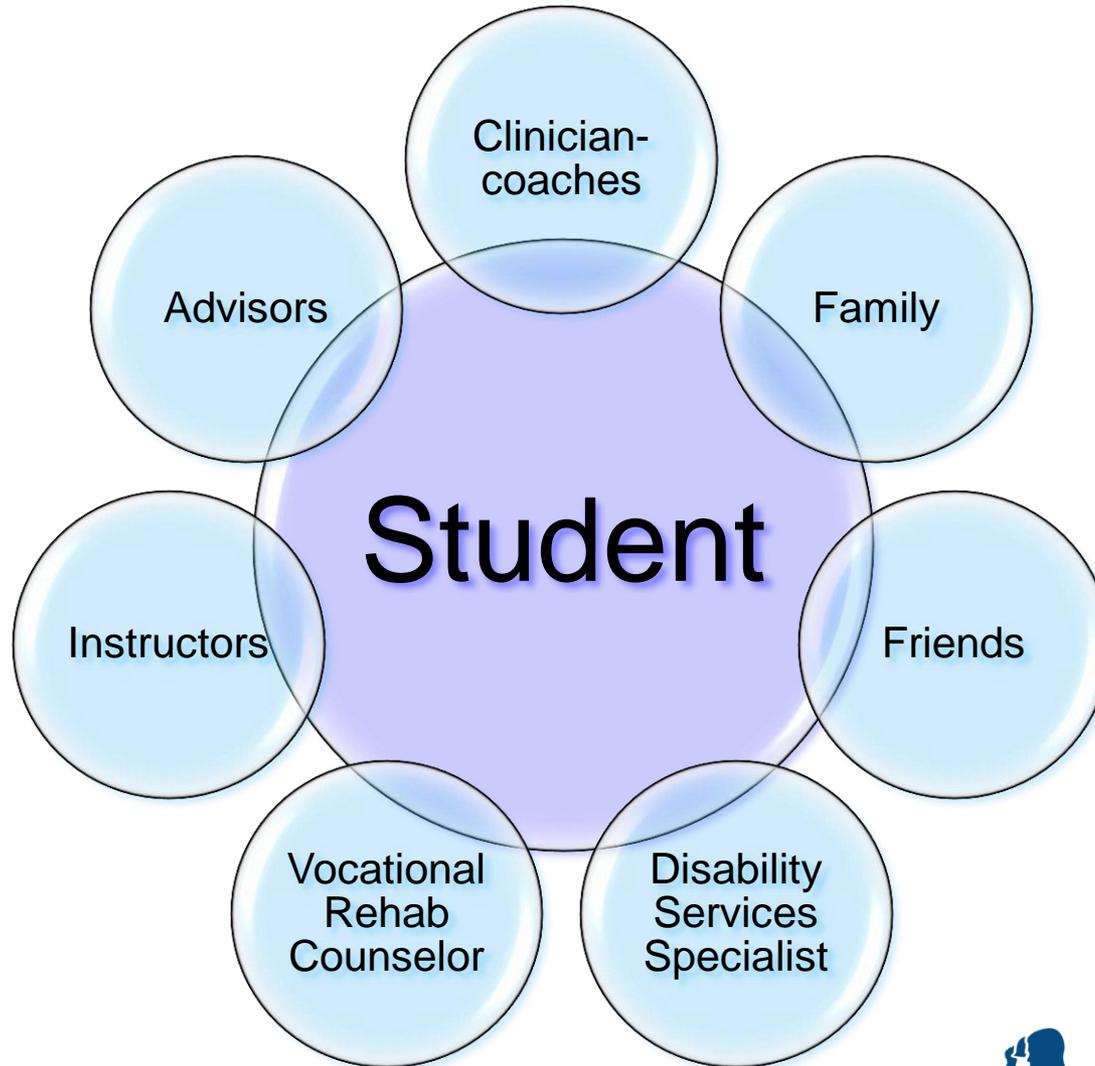
Multiple Outcomes/Multiple Goals

- **Immediate person-centered outcomes**
 - Graded assignments, job-related tasks, home management tasks, using planner, using accommodations, identifying challenges, reporting strategy use
- **Long term person-centered outcomes**
 - Grades, decisions about job/roommates/academic major, acknowledging need for accommodations, becoming employed, reporting strategy use

Polling Question #4

- **True or False.** Creating a team benefits the student academically and emotionally.

Create a Team



Coaching Self-Management: Case Example

- **Student had difficulty keeping school and social life organized**
 - Could not explain why
 - Had reduced course load
 - Fatigue management program
 - Eye exercises for convergence disorder
 - Sleep regime with medication for headaches

Plan-Do-Review

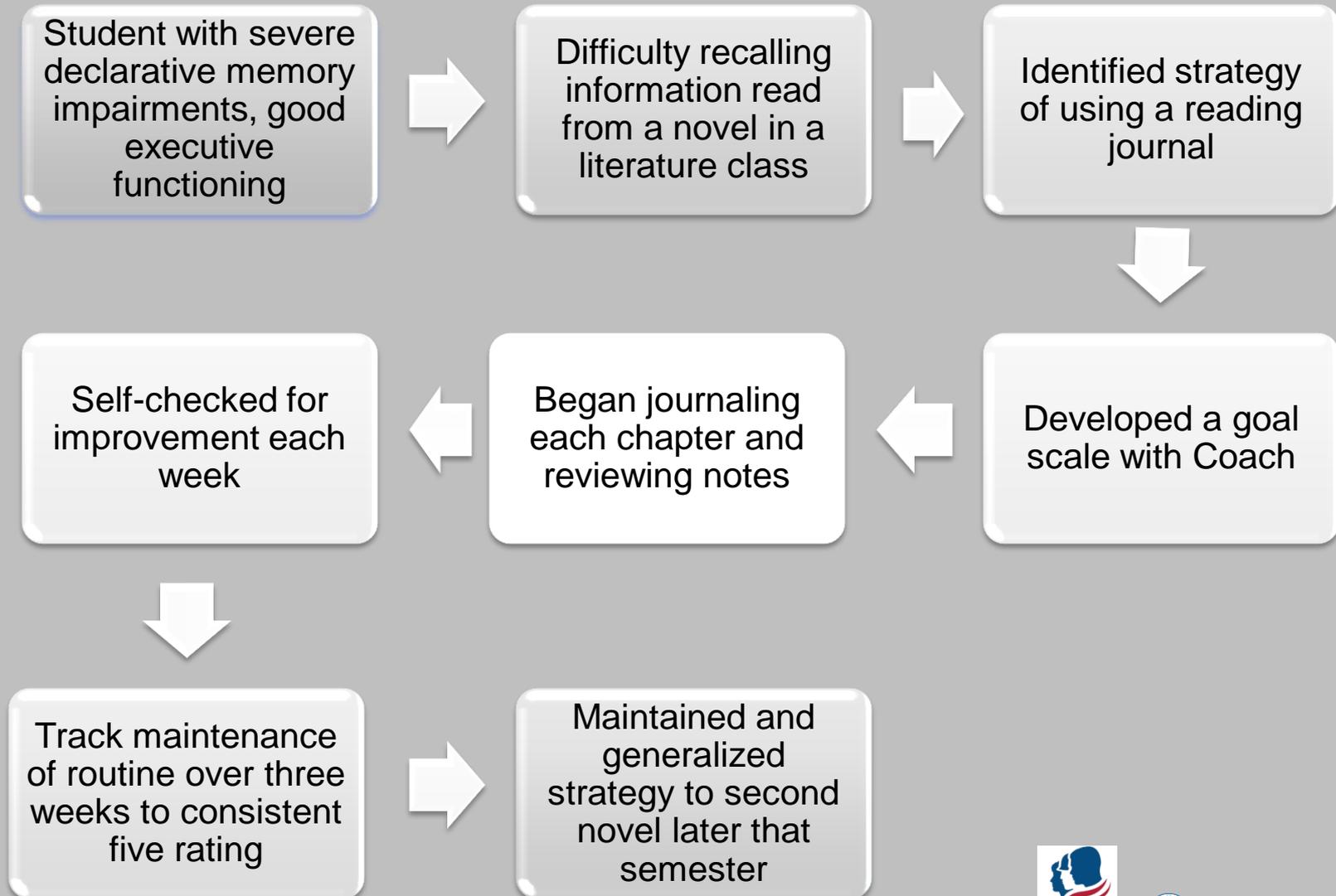
WEEK OF 11/16-22

PLAN			DO	REVIEW
Time/ Priority	Task description	Time expected	check	Actual time Comments/observations
1. 11/17	Read CSCL - (Rhetoric Readings Assignments)	1.45	✓	12:20 - 1:15; 1:20 - 1:40 11:49 - 2:16
2. 11/17	SPANISH - SAM	.50	✓	12:35 - 45 2:40 - 57 3:58 - 3:00 4:03 - 10
3. 11/17	CSCL ANALYTICAL ESSAY Assignment Outline	1.00		
4. 11/18	WRITE <u>INTRODUCTION</u> OF PAPER	1.00	✓	1:19 - 2:15 (DIDN'T TAKE ME AS LONG TO START IT, SO I KEPT GOING AHEAD AND FINISHED THE 1ST PARAGRAPH)
5. /18	2nd TP	.45	✓	2:37 - 3:04
1/20	PAPER	1.20	✓	1:05 - 2:00, 2:15 - 3:15 6:14 - OFF • ON 8:45
#1				
/21	paper	1.10	✓	12:50 - 2:00 } Finishing up 3:15 - 3:58 } Editing
11/22	SPAN - CHARACTER	.45	✓	11:50 - 12:00
1/22	PAPER	1.00	✓	11:03 - 11:50 3:40 - 4:20 8:15 - 9:31

Coaching Self-Management: Other Examples

- Creating realistic timeframes
- Organizing schedule by week, by semester
- Integrating all the scheduling information from home, work, school into a central repository
- Organizing writing, research projects

Coaching Self-Learning: Example #1



Goal Attainment Scaling

- **Individualized scaling system**
- **Allows clinicians and clients to:**
 - Develop goals together
 - Quantify progress toward reaching the goals
 - Rating scale with 5 levels of achievement
- **Demonstrated to be useful for people with TBI with complex executive function tasks such as financial management (Grant, Ponsford, and Bennett, 2012)**

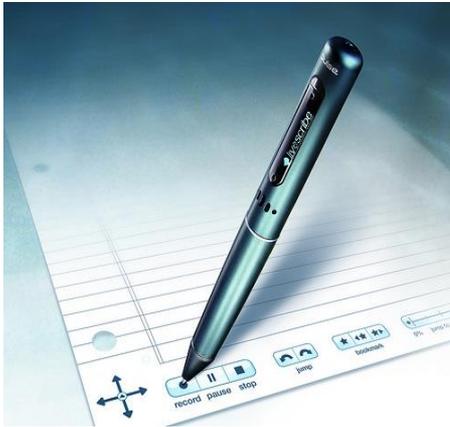
Goal Area: Reading Journal

Goal Area: Reading Journal		
	5	Writing summaries of all chapters read. Effectiveness of notes in triggering recall is consistent, resulting in rich, specific recall of events and characters. Scanning of the book is limited to only specific scenarios (such as using quotes for an essay). Notes are well elaborated and allow for integration of ideas across the narrative.
	4	Writing summaries of all chapters read. Effectiveness of notes in triggering recall is fairly consistent, so that only minimal scanning of the book is needed to recall details. Notes are well elaborated.
Target	3	Writing summaries of most, but not all chapters read. Alternatively, all chapters have notes, but effectiveness of notes in triggering recall is inconsistent. Some time is spent scanning the book rather than relying on summaries.
Starting Point	2	Writing summaries of only a few chapters. Effectiveness of notes in triggering recall is inconsistent. More time is spent scanning the book than relying on summaries.
	1	Writing summaries of chapters read only rarely or not at all.

Coaching Self-Learning: Example #2

Overall 'product' goal

- Student's grades will improve on weekly quizzes in math class.



Process-goals

- Student will record lectures while taking notes using Live Scribe (Smart Pen)
- Student will review lectures prior to quiz
- Student will evaluate strategy usefulness

Coaching Self-learning: Other Examples

- **Using the SR process, extinguish ineffective strategies, replace with effective ones**
 - Repetition – ineffective AND increases confidence
 - Active learning – keywords, note taking, recording, self-quizzing, staying organized, PQIRST, imagery
 - Manage environment
 - Complex projects – understanding instructions, creating a plan, identifying steps
 - Use accommodations

Coaching Self-Advocacy: Case Example

- Student had a goal of attaining a 4.0 GPA
 - Capable ... but at great cost of studying constantly, no extracurricular activities, would not socialize with roommates, repeatedly checked her work to excess
 - Side effect - anxiety, self-doubt
- Set two advocacy, 1 self-assessment goal
 - To engage in activities that she enjoyed on campus – e.g., choir, theater (++)
 - To sit in the common area during meals (+)
 - To self-assess if these changes resulted in positive change
- Set one academic goal: to allow these other goals to be addressed even if it meant < 4.0

Coaching Self-Advocacy: Case Example

- **Slight decline in grades, as she participated in social activities**
 - Being in a school musical
 - Moving to an apartment with friends
- **Maintained a positive outlook, perception of self changed to “I’m not defined by my GPA”**
 - She gained resiliency as she expanded socially
 - She no longer defined herself by her GPA

Coaching Self-Advocacy: Other Examples

- Use accommodations provided by Disability Services
- Maintain relationships with Disability Services to get accommodations they need
- Meet someone in every class
- Share with others about brain injury
- Find activities with friends
- Find friends who will respect, accommodate

Transfer of Skills, *Naturally*

1. **Vary the activity and context**
2. **Explicitly discuss** when, where, why and how the skill can be used using bridging statements and questions...
3. **Practice self-regulation thinking in natural activities;** re-evaluate and modify skills based on client's self-evaluation using self tracking using daily/weekly log apps, texting, email
4. **Create portfolio 'play book'**
Record what works and what does not, for what activities, under which conditions, and when

Portfolio 'Play Book'

I. STRATEGIES TO STUDY FOR EXAMS

II. STRATEGIES TO TAKE NOTES IN CLASS

III. STRATEGIES FOR STUDYING

IV. STRATEGIES FOR WRITING A PAPER

A. Include a generic outline.

V. STRATEGIES FOR PLANNING & TIME MANAGEMENT

VI. STRATEGIES FOR ROTE MEMORIZATION

VII. STRATEGIES FOR READING

VIII. STRATEGIES FOR MANAGING MY EATING HABITS

IX. STRATEGIES TO MOTIVATE MYSELF

X. RESOURCES

Two Case Studies: Pre-Support

(Kennedy & Krause, 2011)

Student 1	Student 2
Established support team	Declined to set up team
Goal for 1 st semester: B average	Goal for 1 st semester: A average
Reduced courseload: 9 credits	Courseload: 13 credits
Accommodations: Notetaker, 1.5 time	Declined accommodations
No off-campus job	Two off-campus jobs

Multiple Outcomes

(Kennedy & Krause, 2011)

	Student 1	Student 2
Assignment grades	Cs to Bs on papers after intervention	Improved math quiz grades before dropping class
Courses completed	Completed 12 out of 12 credits 2 nd semester	Completed 10 out of 12 credits 2 nd semester (dropped & replaced one class)
Strategy Portfolio	Yes	No
GPA	1 st semester: 3.7 2 nd semester: 3.3 Made Dean's list	1 st semester: 2.3 2 nd semester: 3.7 Made Dean's list

Multiple Outcomes

(Kennedy & Krause, 2011)

CSS-BI	Student 1	Student 2
Problems after TBI	Same as pre-intervention + difficulty with academics	Same as pre-intervention except anger & mood changes + difficulty with academics
Academic challenges	Same as pre-intervention except get overwhelmed when studying	None now “unsure” about forgetting in class & trouble prioritizing
Specific strategies	13	3
Vague strategies	3	7

Multiple Outcomes

(Kennedy & Krause, 2011)

Student 1	Student 2
Started part-time job 2 nd semester	Reduced to one part-time job 2 nd semester
Improved time management by knowing how much, long studying takes	Recommended program to another student with TBI; has VRS counselor
Increased independence & confidence with writing papers	Gave public speeches to high school students about drinking
Independently arranged meetings with professors	Independently visited professor office hours 2 nd semester
Chose a major, studied abroad	Moved to apartment with one roommate instead of five
Made Dean's list, graduated 2013, employed	Maintained good academic standing, graduated 2012, employed

Other Students

Student	Semesters	Domains	Grades	Academic	Participation outcomes status
#3 severe TBI	3	Learning Mgmt Advocacy	Improved	Good, 3.5 GPA, Senior, graduate 2014	declared math & psych major, continued follow-up for 2 semesters (2x per semester)
#4 moderate TBI	2	Mgmt Advocacy	Improved	Good, 3.5 GPA during program, Graduated	Moved home, follow-up through email
#5 multiple mild TBIs	3	Mgmt Learning	Improved	Good, 3.7 GPA, Graduated	Biology, applied to grad school, follow up through email

Coaching Tips

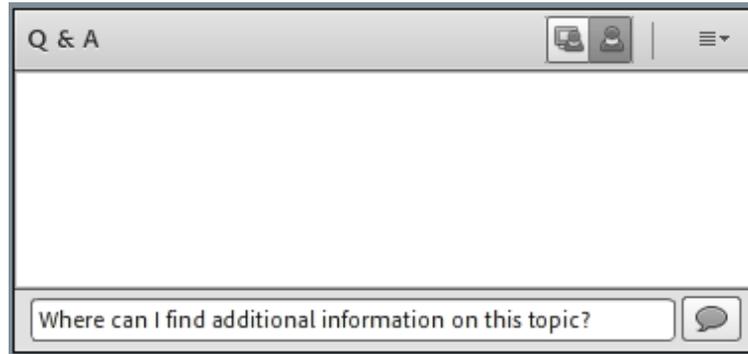
1. Rely on multiple outcomes
2. Be an active listener
3. Students need support across semesters
4. More frequent courses = routine, structure, avoid 1x weekly
5. Use technology
6. Prior college experience helps
7. 'You can't make me do it'
 - Prochaska's stages of change, coping strategies
8. Acknowledge cost/benefits explicit
9. Be flexible
10. Know when to refer

Acknowledge Colleagues and Student Clients

- Miriam Krause, PhD, CCC-SLP
- Katy O'Brien, MA, CCC-SLP
- Sarah Schellinger, MA, CCC-SLP
- Jocelyn Yu, MS

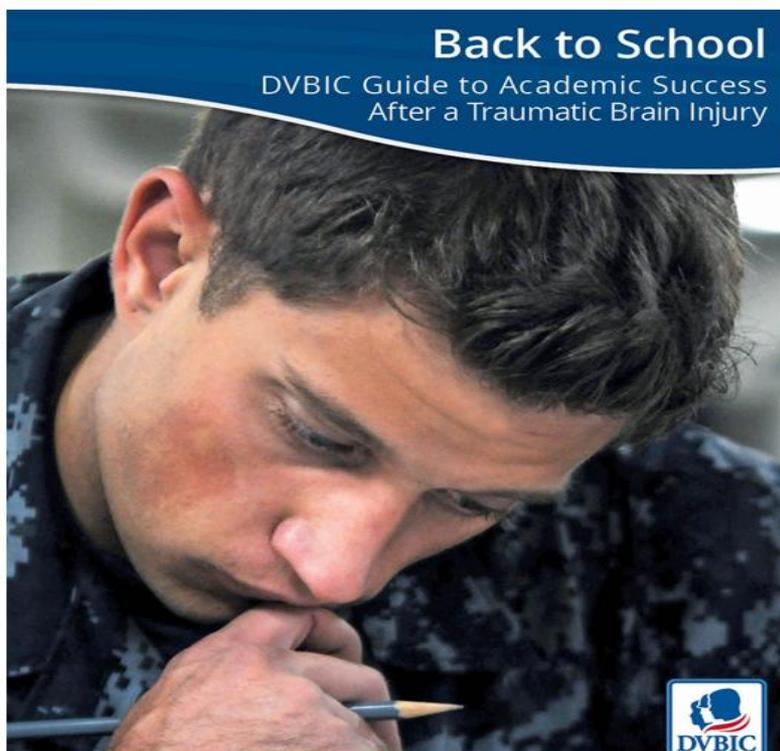
Question & Answer Session

- Submit questions via the Adobe Connect or Defense Connect Online question box located on the screen.



- The question box is monitored and questions will be forwarded to our presenters for response.
- We will respond to as many questions as time permits.

Coming Fall 2013 at www.DVBIC.org



For service members
and veterans who
sustained a TBI

Manage symptoms,
learn strategies for
success, make the
transition

Interactive Customer Evaluation

Please take a moment to complete the **Interactive Customer Evaluation**.

Your responses will help us to determine future topics, improve on the delivery and experience of the webinars, and to reach more of your colleagues.

The screenshot shows a web-based evaluation form titled "2013 Defense and Veterans Brain Injury Center (DVBIC) Webinar Series Comment Card". The form includes a header with the ICE logo and navigation links. It contains several sections of questions with radio button options and dropdown menus. The "Customer Service" section includes a 5-point scale for Facility Appearance, Employee/Staff Attitude, Timeliness of Service, and Hours of Service. The "Satisfaction" section has a question about satisfaction with the experience. A final section allows for optional comments and recommendations up to 4000 characters.

Home - About ICE - Manager Login (CAC required) - Help
Service Provider Search: Go

Home - DCoE - All Service Providers - Comment Card

OHE 0704-0420, expires 31 MAY 2013
RCS DD-DASH(AR)2124, expires 30 APR 2013

2013 Defense and Veterans Brain Injury Center (DVBIC) Webinar Series Comment Card

This questionnaire allows you to tell us more about your awareness and satisfaction with the 2013 DVBIC Webinar Series. All questions are optional and some may not be applicable to your experience. Thank you for your participation.

[Information about this service provider \(FAQs, Events, Contacts, Links\)](#)

Are you currently a

Are you a health care provider? Yes No N/A

What discipline? If no, please answer not applicable.

Did you pre-register for the webinar? Yes No N/A

Did you receive continuing education for this webinar? Yes No N/A

As a result of attending this webinar, I will use the information learned for professional use.

As a result of attending this webinar, I will seek more information about this topic.

Would you recommend this webinar to others? Yes No N/A

Please describe other webinar topics you would like DCoE to offer.

Customer Service:

Facility Appearance	<input type="radio"/> Excellent	<input type="radio"/> Good	<input type="radio"/> OK	<input type="radio"/> Poor	<input type="radio"/> Awful	<input checked="" type="radio"/> N/A
Employee/Staff Attitude	<input type="radio"/> Excellent	<input type="radio"/> Good	<input type="radio"/> OK	<input type="radio"/> Poor	<input type="radio"/> Awful	<input checked="" type="radio"/> N/A
Timeliness of Service	<input type="radio"/> Excellent	<input type="radio"/> Good	<input type="radio"/> OK	<input type="radio"/> Poor	<input type="radio"/> Awful	<input checked="" type="radio"/> N/A
Hours of Service	<input type="radio"/> Excellent	<input type="radio"/> Good	<input type="radio"/> OK	<input type="radio"/> Poor	<input type="radio"/> Awful	<input checked="" type="radio"/> N/A

Did the product or service meet your needs? Yes No N/A

Satisfaction:

Were you satisfied with your experience at this office / facility? Yes No N/A

Comments & Recommendations for Improvement: (up to 4000 characters) (optional)

Acronyms

Abbreviation	Acronym Name
EF	Executive Function
LTM	Long Term Memory
PQRST	Preview, Question, Review, State, Test
SA	Self Advocacy
SL	Self-Learning
SM	Self Management
SR	Self Regulation