

**TBI and Employment:
Critical Issues**

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Research

- 3.2 million people live w/effects of brain injury: estimated that nearly half fail to return to work
- Colorado: state registry of patients hospitalized for TBI – about ½ return to work within a year
- 2006 study: rate falls to 20% failure rate at 10 years post injury
- VR services helped only about 50% of those served achieve successful employment

Vocational Rehabilitation

- 1997 sample of hospitalized TBI patients: only about 1/3 were even aware of the VR system
- Better outreach from VR system is needed to newly injured and to those with long-time injuries (chronically unemployed)
- Better partnering between VR and researchers to identify “what works” – build a strong evidence base (problems with assigning people to a “control group” is a barrier)

Return to Work Strategies

- One size does not fit all: individualized approach
- Job placement staff must have knowledge of BI
- Research suggests:
 - Provide VR services early in the rehab process
 - Create a supportive work environment
 - Cognitive training: compensatory vs restorative
 - Assistive Technology
 - 2009 study: Supported Employment; Case Coordination; Program-Based VR

Vocational Rehabilitation Process

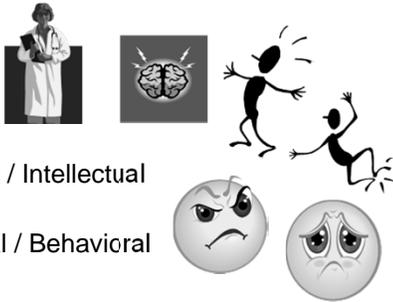
- Assumptions:
 - Does the individual with a brain injury request assistance?
 - Do not rely on the family's insistence that the person wants to work!
 - Is individual eligible for services? (documented disability; disability is a barrier to employment; financial need if there will be cost services)

Vocational Rehabilitation Process

- Assumptions:
 - Is individual medically and psychologically stable (to focus on employment goal)? Evaluate medical, physical, cognitive status.
 - Do not say "Come back in two years..." when you have recovered!
 - Can individual return to same job or find new job?
 - Assess capacity to recover abilities **and** learn new things. Person may have difficulty recognizing changed strengths, challenges.

Effects of Brain Injury

- Medical
- Physical
- Cognitive / Intellectual
- Emotional / Behavioral



Where to start?

- Consider using a "support team" approach! Needs are long-term and complex – you will need help to ensure continued success on the job!
 - Assessment – Start with recent and comprehensive neuropsychological evaluation – ALSO use "real life" assessments whenever you can!
- Recommendations should be work-related but also include ways to improve daily functioning.

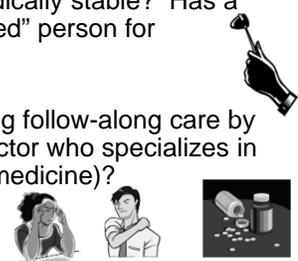
Where to start?

- Strategies should be compensatory in nature, not restorative! Individual must "buy into" the use of any strategy or it will not be effective.
- It's all about SUPPORT and JOB MATCH!
These are critical to success in employment!



Medical

- Is the person medically stable? Has a physician "released" person for employment?
- Is person receiving follow-along care by psychiatrist (doctor who specializes in rehabilitation medicine)?



Medical

- What medications does person take? What are effects? Who is monitoring?
- Fatigue, headaches, pain may affect job performance



Physical



- Is person still receiving outpatient medical therapies? If so, which therapies and what are goals?
- What is prognosis in regard to physical issues – how much healing, recovery is expected? “Real life” evaluations are usually informative.
- What about assistive technology, augmentative communication devices, orthotics?

Cognitive / Intellectual



- Post-injury, individual may score lower on tests of intelligence, but not across all scales.
- Higher ability pre-injury, better outcome post-injury.
- Mental processes may be slower, not as accurate.



Cognitive / Intellectual

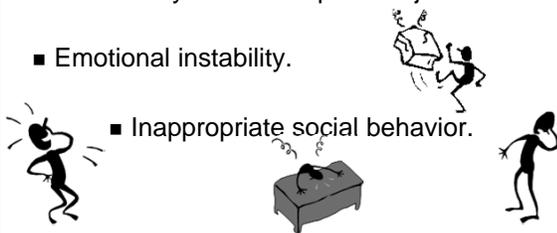


- Concentration decreases; distractibility increases.
- Memory problems present a significant challenge in the ability to function on a daily basis – and in employment setting.
- Compensatory strategies and supports are key to success on job!



Emotional / Behavioral

- This is typically the biggest challenge to successful employment – it is usually not the inability to learn or perform job tasks.
- Emotional instability.
- Inappropriate social behavior.



Where to start?

- Team approach – always a good option!!
- Assessment – neuropsychological and “real life” evaluations are the most informative.
- Strategies / Supports – keys to success!
- It's all about SUPPORT and JOB MATCH!



Assessment 

- Assessment within last two years, as feasible
- Evaluate status: medical, physical, cognitive/intellectual, and emotional/behavioral 
- Consult with / add to “support team” as needed: physician, therapist (OT, PT, SLP) psychologist, behavior specialist, job coach

Assessment 

- Vocational evaluation / situational assessment – always try “real life” assessments, you will get valid information if done well!
- What are the recommendations?
Counselor should request vocationally related reports, but also ask for daily functioning strategies – a life skills trainer can support person to function better in non-work settings – this boosts employment success!

Strategies 

- Consumer participation and direction are critical in choosing / implementing compensatory strategies! 
- Are there any medical / neuropsychological recommendations or strategies?
- Is behavior consultation needed? If so, what is consultant’s philosophy (Positive Behavior Support)? 

Strategies 

- Community living assessment: what strategies are needed to function better on daily basis? What does person use, what is successful?
- It only works if it works! 



Employment Support 

- Most people with significant brain injury benefit from ongoing employment support: job coach training services at a minimum.
- Supported employment is ideal: job placement, on site training, long-term follow-along. 

Employment Support 

- Employment Specialist is part of the TEAM!
- Same strategies used at home and in community should be used on job site (and vice versa): Life Skills Training can be critical piece! 

Job Match

- It's all about the JOB MATCH!
- Work environment, job duties should be a good "fit" with individual's strengths, abilities, and challenges.
- Example: If individual does not handle interruptions well, has poor interpersonal skills, is receptionist a good match?



Job Match

- Individual with poor hygiene: Is solution to find a job where odor is not noticed? Or to work with person to improve hygiene (life skills training)? Maybe both?



Where to end?



- It may end for the rehab specialist, but for the person with a brain injury: there is NO END...
- Best practice is to re-assess in all areas on ongoing basis, individuals continue to improve over time ("...it's been two years, and I'm still having problems...")
- Even if currently employed, case closed, can refer person back to DRS: counselor can provide post-employment support or re-open case.



What is success?

- Consider employment in context of person's life: it is not a separate "event" that begins and ends.
- Long-term support, not just in employment.
- Team approach!! Supportive people across all of the individual's environments.



What is success?

- Re-define success: demographics, challenges.
- Rick Parente study: social support and supported employment are best indicators of job success.



Contact Information

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