## **CARE Head Injury Accommodations**



Staff Completing Checklist:

Date: \_\_\_\_\_

Survivor Name: \_\_\_\_\_

**DON'T FORGET: CONNECT FIRST!** 

### **Common Brain Injury Accommodations**

Have flexible staff schedules or open hours where people can drop in without an appointment Put signs up in your building that point towards exits, kitchen, bathroom, etc. Slow down information, plan for additional time Do a mind map of resources (identifying sources of support, agency involvement, agencies they would like to work with, medical providers, etc.) and have a hard copy for assistance Repeat things frequently and have them repeat back to you, in their own words, what you talked about Provide written information and document conversations as much as possible, for recall Provide calendars, notebooks and checklists to help with memory Check in with survivor often, particularly in the beginning of their stay Identify some "go to" people that can assist with anything that comes up Have staff wear nametags for memory or processing challenges Give Invisible Injuries Booklet to survivors and review with them

# **CARE Begins with Connection**

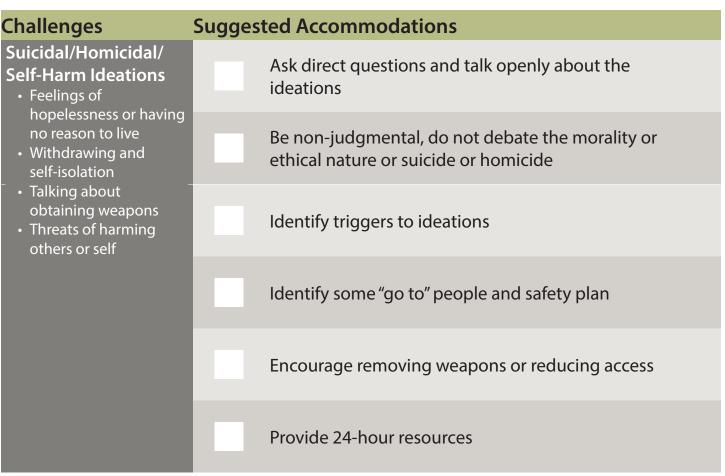
Challenges	Suggested Accommodations
Difficulty Making Connections • Does not open up • Is guarded or reserved • Doesn't engage with you or others • Hesitant to share	Be patient, building relationships takes time and trust has to be earned. Don't take anything personally.
	Acknowledge that people's experiences with trauma, abuse and getting help can make it difficult to trust others, including advocates
	Validate challenges and feelings and highlight the person's strengths
	Ask what helps you with (feeling more comfortable here, your memory, paying attention, etc.)
	Ask, "What has worked for you, and how?" Ask, "What hasn't worked for you, and how?"

# **Physical Health Challenges**

Challenges	Suggested Accommodations
<ul> <li>Physical Health</li> <li>Challenges</li> <li>Dizziness</li> <li>Headaches</li> <li>Physical pain or soreness</li> <li>Balance problems</li> <li>Nausea or vomiting</li> <li>Seizures</li> </ul>	Check in regularly to see if headaches, dizziness, pain or balance problems get better. Encourage survivors to fill out symptom log in Invisible Injuries booklet
	Ask if there has been anything helpful that they have in the past to manage these symptoms
	Help identify if there are any activities that bring on or worsen problems, and make plans to avoid them as much as possible
	Set up room or space to minimize tripping (e.g. clear clutter from walkways, no cords on the ground, provide lighting for spaces at night, etc.)
	Encourage medical evaluation and if problems continue, facilitate the survivor getting to the doctor

Challenges	Sugges	ted Accommodations
<ul> <li>Sensory Problems</li> <li>Light sensitivity</li> <li>Noise sensitivity</li> <li>Vision changes</li> <li>Ringing in the ears</li> </ul>		Provide earplugs, headphones, sunglasses, or adjust lighting if necessary
		If possible and survivor wants it, provide a room where the survivor can be alone. If not, pair with roommate with similar sensory needs
		If problems continue, facilitate the survivor getting to the doctor
		Minimize sounds and visual stimulation in meeting spaces
		Meet in places with natural light if LED lights bother their vision
<ul> <li>Sleep Difficulties and Fatigue <ul> <li>Feeling fatigued or exhausted</li> <li>Hard time waking up</li> <li>Hard time falling asleep</li> <li>Sleeping more or less than normal</li> <li>Too tired to participate in normal activities</li> <li>Nightmares or flashbacks</li> </ul> </li> </ul>		Help identify conditions that facilitate sleep (music, darkness, quiet, etc.)
		Consider sleep aids: earplugs, eye masks, lighting, white noise machines, fans, nightlihgts, privacy curtains, etc.
		Avoid over the counter sleep aids or equivalent
		Schedule appointments for most convenient time for survivor
		Encourage naps or additional rest and regular sleep routines
		Provide assistance with waking, if requested

### **Emotional Challenges**



Challenges	Sugges	ted Accommodations
<ul> <li>Controlling Emotions or Reactions</li> <li>May say or do things without thinking</li> <li>May not follow directions</li> <li>May dominate conversations</li> <li>May struggle to focus due to feelings of anxiety</li> <li>May have minimized motivation due to depression</li> <li>May experience flashbacks</li> <li>May be anger-focused</li> <li>May experience frequent irritability</li> </ul>		Stay calm and in control of your own feelings and reactions
		Validate the importance of expressing emotions and assist with finding healthy ways to do that
		Help survivor identify how and why their mood and emotions have changed
		Talk about "stop, think, act" which encourages the person to slow down and think about consequences of a behavior before taking action
		Give feedback and share with the person your honest opinion if something is dangerous or unsafe
		Respond directly and promptly to inappropriate behavior
		Provide several safe solutions to a problem and encourage the survivor to make the best choice
		Identify strategies to regulate emotions and reduce acute anxiety, such as breathing techniques, going for a walk, fidget toys, etc.
		Consider the survivor's frame of mind (angry, depressed, fearful) and encourage reframing and redirecting energy to positive thoughts and possible actions

NOTES:

## **Thinking (Cognitive) Challenges**

Challenges	Suggest	ted Accommodations
<ul> <li>Getting Things Started or Figuring Out What to Do Next <ul> <li>Problems getting a task started or completing tasks</li> <li>Needs constant reminders to complete a task</li> <li>Misses deadlines, appointments</li> <li>Challenges remembering things that need done in the future</li> <li>Able to identify a goal but has challenges in achieving it</li> </ul> </li> </ul>		Use calendars, folders, checklists, and planners to organize activities into small achievable steps
		Prompt survivor to write down important information
		Timers or alarms can be used to help a person get started and to be "productive" for a period of time
		Be predictable
		Provide information in a factual manner
		Help survivor identify places to keep important things
		Consider having laminated instructions for ease of use (thermostats, microwaves, communal appliances, etc.)
<ul> <li>Organizing Things <ul> <li>May lose papers, phone numbers, or other important documents</li> <li>Space might be messy or cluttered</li> <li>Has a hard time finding things</li> <li>Misses deadlines or important dates</li> <li>Late to meetings or appointments</li> </ul> </li> </ul>		Use planners on the last pages of Invisible Injuries to help structure daily plans and monthly important information
		Discuss with survivors tricks or tips they have used that helps with organization
		Identify strategies such as putting things in the same place to minimize frustration
		Be patient and validate this as being a normal symptom of head injury
		Label things in a room that are for each person (putting a name on a shelf, locker, dresser, bed, etc.)

Challenges	Suggest	ted Accommodations
<ul> <li>Understanding Things</li> <li>Only understands a part of what is talked about</li> <li>Struggles to keep up with a conversation</li> <li>Has a hard time finding words</li> <li>May appear to "zone out"</li> <li>May appear passive, unmotivated, or "lazy"</li> </ul>		Help with forms or paperwork and provide additional time
		Simplify information and allow extra time for people to process/think/remember. Make sure they don't feel rushed.
		Limit use of open-ended questions. Use yes/no format, structured, or multiple choice where possible
		If survivor wanders off topic, redirect to topic at hand
		Cue survivor with beginning sounds of word if survivor has word-finding difficulties
Paying Attention, Focusing, or Following Directions • Short attention span • Easily distractible • Unengaged or appears bored or disinterested • Mental fatigue or tiredness		Create a checklist of things to talk about or do during a meeting to help people stay on track, and can cross things off when done
		Encourage survivor to do hard or challenging activities earlier in the day when the brain is fresher
		Make direct eye contact when meeting
		Work on only one thing at a time
		Make conversations, meetings, and tasks simple, brief, and to the point
		Meet in a quiet environment and limit visual and verbal distractions
		Provide opportunities for movement (go on a walk with the survivor)
		Have resources available for hands on or tactile use (coloring pages or play dough)

Challenges	Suggested Accommodations
<ul> <li>Remembering Things</li> <li>Might be described by themselves or others as forgetful</li> <li>Has challenges learning new information or recalling things previously discussed</li> <li>Does not follow through with plans or activiteis</li> <li>Inconsistency is common</li> </ul>	Present new information in small chunks
	Review information/notes/status from last interaction before beginning a new one
	Help person "remember to remember." Come up with strategies, such as developing associations, following a set routine, and adapting the environment so that you rely less on your memory
	Provide additional tour of shelter after first 24 hours

#### NOTES:

#### **REMEMBER:**

Follow up with survivor every 1-2 weeks to find out what worked well, what didn't work and what else should you try.



ILLINOIS COALITION TO ADDRESS INTIMATE PARTNER VIOLENCE-INDUCED BRAIN INJURY

Talk to a domestic violence advocate or go to https://tbi-dv-il.org



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