Brain Injury Screening through the Area Agency on Aging in Rural Nebraska

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Purpose

The purpose of this project is to:

- **Provide information** to service coordinators at the Area Agency on Aging about brain injury

- **Train** service coordinators on the use of a brain injury specific screening tool

- **Gain feedback** from the service coordinators about the process

- **Present data** regarding how many AAA clients had potential brain injuries (e.g., number, severity)
Methods

This project consisted of 5 parts:

1) The researchers conducted BI education and administered the pre/post misconception survey.

2) The researchers conducted the BI screening tool training.

3) The service coordinators utilized their BI education and screening tool training by administering the OSU TBI-ID to clients.

4) Researchers conducted follow-up interviews with the service coordinators three-months after completion of screening tool training and screening of AAA clients.

5) *Follow-up education was completed about: services available for BI survivors, the scope and purpose of SLP services and provided a list of local therapy providers.*
Methods-Continued

- **Misconceptions Survey (Gouvier, Prestholdt, & Warner, 1988)**
  - Modified for Service Coordinators
  - 25 true/false statements about brain injury and the recovery process in results says 11

- **OSU TBI-ID screening tool**
  - Consists of 6 questions.
  - Structured interview format is designed to elicit lifetime history of TBI.
  - Avoids misunderstanding about what a TBI is by asking about injuries, then determining if a TBI may have occurred.
  - Provides richer information about history than simple “yes/no” (e.g., number, severity, effects, timing, etc.)

- **OSU TBI-ID Training Slides**
Results - Service Coordinators

- Service Coordinator Participants increased their knowledge of BI in the areas of:
  - Recovery process, BI sequelae, Disorders of consciousness
- On the pre/post survey scores increased from 6.42 average to a 9.0 (out of 11)
  - That the screening would be easy to do on an on-going basis with all clients. “It would be just another form…” “Once you’ve done it over and over I don’t see it not being user friendly…”
  - *That they would like more information about what services are available for people with BI.
  - They cited minor changes to the OSU TBI-ID form that would make it more ‘user friendly’.
Results-Screening for TBI

- AAA Clients
- Response of “Yes”, indicating an injury and potential Brain Injury (BI)
  - Incidences: 45/99 (45%)
  - 4 more participants reported “dazed” or “memory gap” symptoms bringing our total of certain TBI survivors to 14/28 (50%).

<table>
<thead>
<tr>
<th>Time Unconscious</th>
<th>Severity</th>
<th># of Participants</th>
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<tbody>
<tr>
<td>&lt;30 min.</td>
<td>mild BI</td>
<td>7/28 (45%)</td>
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<tr>
<td>30 min.-24 hrs</td>
<td>Moderate BI</td>
<td>2/28 (7%)</td>
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<tr>
<td>&gt; 24 hours</td>
<td>Severe BI</td>
<td>1/28 (3.6%)</td>
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Data Collection
In Progress Positive Screens

- North Platte: 183 participants
  - 76 participants with positive screens
  - 42% with positive screens
  - 21 participants with 2 or more injuries

- Scottsbluff: 231 participants
  - 38 participants with positive screens
  - 16% with positive screens
  - 6 participants with 2 or more injuries
Acknowledgments

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