



Improving Access to Care for Persons with TBI

Project 2: Provider Toolkit for Accommodating Cognitively Impaired Persons in Evidence- Based Treatments

Annual Update – Year 1

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Provider Quote - Challenges to Delivering Care to Persons with Cognitive Impairments

“It is challenging to get comorbidities treated by providers who understand cognitive disability that come along with brain injury...finding a therapist who can take into consideration the cognitive limitations is hard to find.”

...cognitive deficits of patients with TBI were noted to be the leading barrier to ensuring adequate treatment...¹

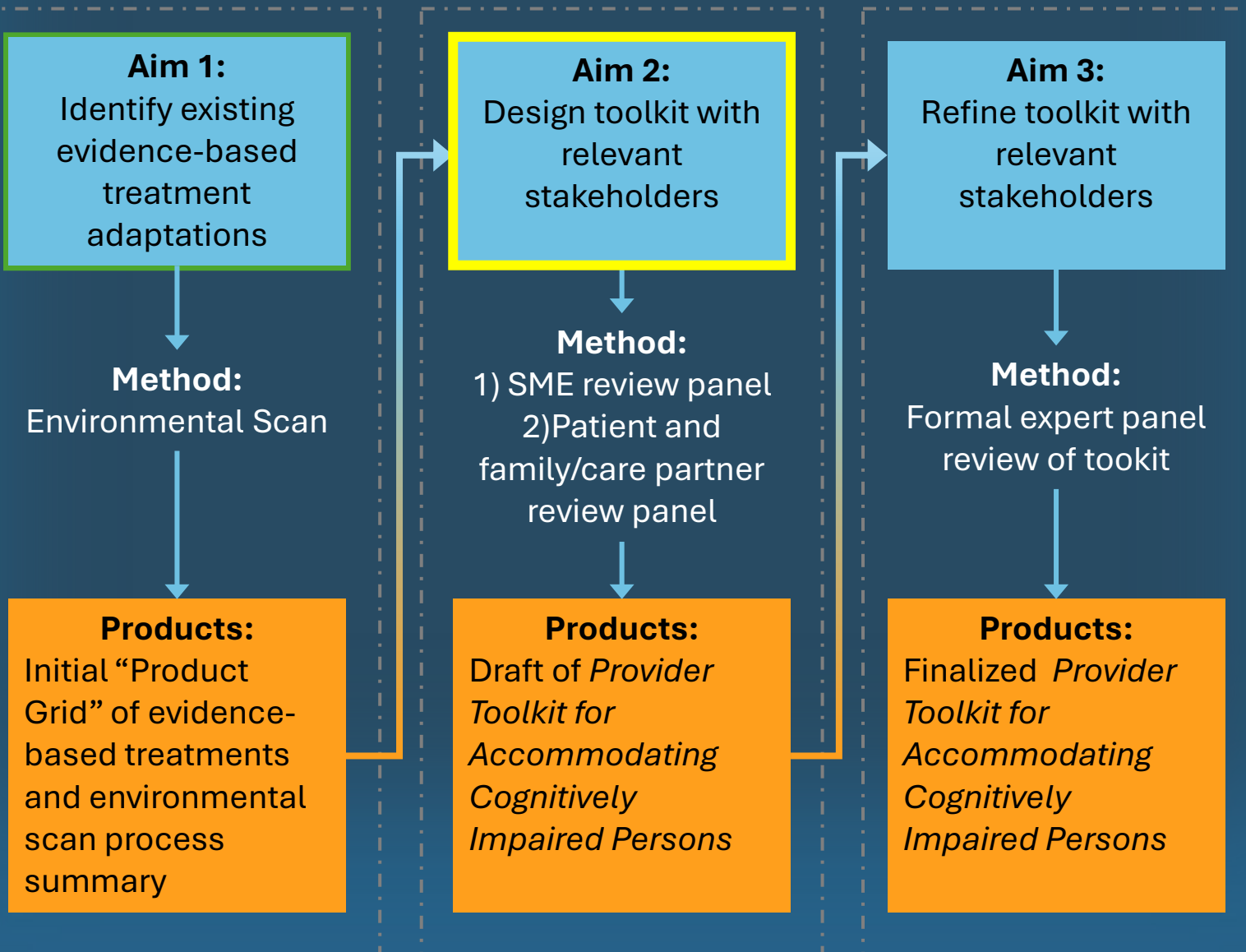
1. Nakase-Richardson R, Cotner BA, Martin AM, Agtarap SD, Tweed A, Esterov D, O'Connor DR, Ching D, Haun JN, Hanks RA, Bergquist TF. Provider perspectives of facilitators and barriers to reaching and utilizing chronic pain healthcare for persons with traumatic brain injury: a qualitative NIDILRR and VA TBI Model Systems Collaborative Project. The Journal of Head Trauma Rehabilitation. 2024 Jan 1;39(1):E15-28.

Project Goal

- This project will address barriers that limit the ability of a person with cognitive impairment to engage in therapies that have been shown to improve mental health conditions and promote well-being
- Evidence-based therapies (EBTs) exist for the most common conditions that co-occur in TBI:
 - **Post-Traumatic Stress Disorder (PTSD)**
 - **Depression**
 - **Sleep Disorders**
 - **Chronic Pain**



Aims & Process



Aim 1a: Discover via environmental scan

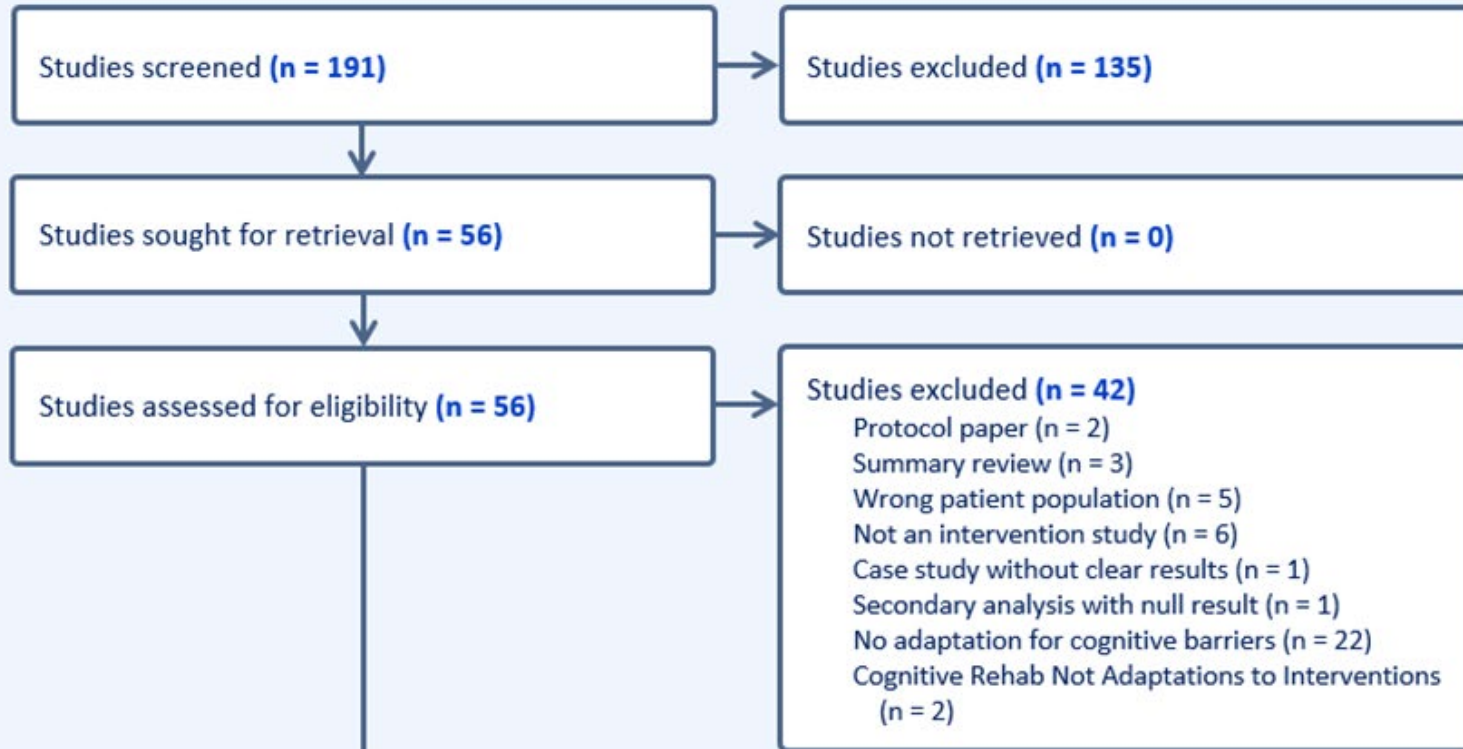
Aim 1a: Identify existing resources that fall into three broad categories:

1. Tools for assessing cognitive difficulties
2. General information on adaptations for EBTs, including how to include caregiver/family members when needed
3. Treatment manuals that include adaptations of existing EBTs



Literature review

Identification & Screening



Included

Studies with products included in review (n = 14)



Connectors

- Email template developed
- 19: investigators, researchers and allied professionals in the field were initially contacted
- 14: additional contacts via PPP, other professional networks, seminars, literature review



Individual Engagement Partners

Convened subject matters experts across our targeted domains

- Kati Pagulayan, PhD¹
- Shannon Miles, PhD²
- Luzimar Vega, PhD²
- Natalie Gilmore, PhD²

Biweekly meetings beginning 10/2023



Criteria and Grid Development

Criteria	Description	Rating	Discussion
Implementation Level / Prior Training	Is prior training necessary to use the material?	1=Yes 2=No	Identifying if product can be implemented by anyone or must have prior knowledge in order to comprehend/ implement
Complexity	Does the level of complexity make this content easier or harder to implement?	1=Easy 2=Mod 3=Hard	Identifying if complexity will cause barriers to understanding and implementing the product's purpose
Accuracy	Content is current and accurate	1=Yes 2=No	Identifying if the product is accurate to a point where can implement the content in today's field
Acceptability/ Relevance	The information is relevant to/suitable for the intended users	1 = Mostly Relevant 2 = Sections are Relevant 3 = Not Relevant	Identifying if those intended to use the product would find it relevant in their practice today
Usability	The information is well organized and easy to navigate.	1 = Well organized/easy to use 2 = Moderately organized/somewhat usable 3 = Hard to use/difficult to access	Identifying if product is presented in a way that allows audience to find relevant information for practice and implement in practice
Credibility/ Evidence based	The authority/ trustworthiness of the information is apparent, references are available, and authors have contact information. Feasibility and potential benefit have been demonstrated/ studied.	1 = Yes 2 = No	Identifying if product should be used in practice



Product Grid Example

	Specialty Area	Prior Training	What training	Complexity	Accuracy	Acceptability/ Relevance	Usability	Credibility/ Evidence based	Whole/Partial Doc?	Partial pages
2: "Mental Health Pocket Card for Management of Patients with Posttraumatic Stress Disorder and Mild Traumatic Brain Injury"							Author			https://veteran
Shannon Miles	PTSD	Not for pocket card. Yes for doing the suggested actions in pocket card.	PTSD Assessment and treatment psychologist	2	1	1	1	1	Whole	N/A
Natalie Gilmore	PTSD	yes		1	1	1	1	1	Whole	N/A
3: "TBI Care: Collaborative Care for Pain after Traumatic Brain Injury, Therapist Manual"							Author			https://veteran
Aaron Martin	Chronic Pain	Yes	likely to need some prior	2	1	1	1	1	Whole	N/A
Shannon Miles	Pain	Yes	regulation stills training.	2	1	1	1	1	Whole	N/A

- 38 products with adaptations for those with cognitive challenges have been reviewed
- 21 general recommendations
- 17 specialized adaptations (depression, chronic pain, PTSD, sleep).



Next steps

Aim 2 (Define and Develop)

- Convene SMEs
 1. *Select high-quality materials from the product grid to be included in the toolkit*
 2. *Brainstorm additional toolkit content, layout, and functions*
- Synthesize data and develop toolkit prototype

Aim 3 (Validate)

- Conduct a formal review of the toolkit prototype to:
determine key strategies for dissemination to practitioners, educational institutions, healthcare systems, and other identified groups to increase the utilization of recommendations
- Synthesize formal review data and make data-driven revisions to finalize the toolkit