

About the Brain Injury Association of New York State

The Brain Injury Association of New York State is a statewide, non-profit membership organization that advocates on behalf of individuals with brain injury and their families, and promotes prevention. The Association provides an array of programs and services to assist families in advocating for a family member with a brain injury. These services include a statewide network of chapters and support groups, a mentoring program, educational programs, conferences, and an information and resource clearinghouse.

The Family Advocacy, Counseling and Training Services Program (FACTS) of the Association is a support service for individuals who have sustained a brain injury before age 22 and their families. FACTS Coordinators are located throughout the state and are able to provide services in each county. The FACTS Program provides persons with TBI and their families with the following free services:

- supportive counseling and on-going emotional support for the individual and family;
- help in locating appropriate services in the community;
- information and linkages with state and local health education and employment systems;
- education, advocacy, and training of persons with brain injury and their families about TBI;
- assistance with the development of brain injury support groups;
- assistance with bringing back people placed out-of-state for services, and preventing out-of-state placements; and
- assisting with outreach and training to local service providers about brain injury to hospitals and schools and with the development of services for persons with brain injury.

**Join the Brain Injury Association of New York State today.
For membership information call 1-800-228-8201
or www.bianys.org.**

GOING BACK TO SCHOOL

**guidelines for school re-entry
following concussion**



**BRAIN INJURY ASSOCIATION
OF NEW YORK STATE**

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WHAT IS CONCUSSION?

A concussion, also referred to as a mild traumatic brain injury, is a blow or jolt to the head that disrupts the normal functioning of the brain. After a concussion, some people lose consciousness or may be confused or dazed for a short period of time, but not always. You can have a brain injury without losing consciousness.

WHAT IS RECOVERY LIKE FOLLOWING A CONCUSSION?

Most individuals who sustain a concussion recover over a period of weeks following the concussion. Some have long term changes; others are fine eventually, but experience changes as time goes on. For children, the effects of the concussion may not be apparent immediately or may change over time. It is critical to keep track of the changes that might occur. Mild brain injuries vary widely. These changes should be evaluated in relation to your child's functioning before the injury. This pamphlet identifies some changes that may occur after a concussion that can have an impact on your child's functioning at school.

PHYSICAL CHANGES YOUR CHILD CAN EXPERIENCE

- recovery- related fatigue that may result in intermittent or unexpected absences from school
- rapid variation in school performance from day-to-day, or morning to afternoon
- lower or no tolerance for increased stimulation; more irritability with increased stimulation
- complaining of headaches, may close one eye, squint, or hold his or her head

- side effects from medications that result in fatigue, impaired memory and organization, or unexpected behaviors

THINKING CHANGES YOUR CHILD CAN EXPERIENCE

- needing more time to process directions and complete tasks
- becoming distractible or inattentive

ACADEMIC CHANGES YOUR CHILD CAN EXPERIENCE

- experiencing more difficulty with academic performance
- difficulty organizing large tasks, (term papers, book reports) and may have difficulty understanding lengthy reading assignments
- needing assistance getting to school in a safe and timely manner
- difficulty learning new information
- needing extra time or preparation transitioning from one class or activity to another may take
- difficulty doing two tasks simultaneously, such as note taking and listening

BEHAVIORAL CHANGES YOUR CHILD CAN EXPERIENCE

- change in relationships with friends
- demonstrate new behaviors including impulsivity
- moodiness, disrespectful or inappropriate comments, poor frustration tolerance, or depression

If these changes persist beyond 30 days, ask your child's doctor to recommend a specialist in brain injury for a more complete evaluation of health problems, and/or behavior, thinking, and communicating difficulties. These professionals are called Psychiatrists and Neuropsychologists. A more extensive list of possible cognitive, behavioral, social, or physical changes can be found at www.bianys.org.

STRATEGIES FOR EDUCATING CHILDREN WITH BRAIN INJURY

When your son or daughter is ready to return to school, he or she may have cognitive, motor, sensory, behavioral, emotional, or social problems that may interfere with the ability to successfully function in school. Listed below are strategies that might be helpful in supporting your child's school efforts.

Attention

- shorten length of assignments or break tasks into smaller parts
- minimize auditory or visual distraction
- provide re-direction to task through verbal or physical prompts

Behavior/Emotional Adjustment

- avoid changes in routine
- provide choices, and be flexible with expectations
- encourage review of behaviors at the end of the day, through a diary or teacher-student contact
- refer to the school counselor, social worker, or psychologist to help develop coping and problem-solving strategies and deal with emotional changes

Expressive/Receptive Language

- provide homework assignments in both written and verbal form
- limit length of verbal directions
- ensure understanding of the directions
- use specific, rather than open-ended, questions

Fatigue

- plan shorter school hours initially
- plan frequent rest breaks
- allow a short nap in a quiet area during the school day

Medical Management

- make sure that school personnel are aware of medications, side effects, and changes in medications
- ensure that the school helps your child take medications

Memory/Organization

- provide additional review to help recall of memorized facts
- organize information in advance to help with transitions
- provide additional review with cumulative subjects such as foreign languages and algebra
- provide extra set of books at home
- use a daily schedule and notebook organizers to help remember routines and assignments
- use a buddy system to help with organization
- limit changes in the daily routine
- use external aids, such as assignment books or written diaries

Physical and Coordination Difficulties

- provide assistance with written tasks
- work with teachers to reduce written work
- a buddy system can help with written work and physical safety
- make sure there is extra time for assignment completion and getting from place to place in the school
- consider safety in activities such as climbing, jumping, and contact sports during recess and physical education

Reading/Visual

- if there are visual organizational problems, it may help to use grid paper to organize columns for multiplication and division
- books on tape may be available for students with reading or visual impairments
- tests may be given orally
- review of classmates' notes may be helpful

- short-term remedial reading instruction may be necessary
- shorter reading passages may be needed to accommodate decreased reading speed and comprehension
- your son or daughter may need larger print, and a larger keyed calculator

Social Support

- work with the school to assure that your son or daughter's readjustment to school is closely monitored (attendance, assignment completion, or other problems)
- a buddy system can help model social skills, particularly in unstructured situations
- make sure that there is extra supervision in unstructured activities
- encourage your child's participation in community clubs or after-school programs
- consider an older-grade buddy or peer tutor for specific academic or social activities, tutoring, homework, and lunch time
- your son or daughter may benefit from conflict resolution skills and activities



RESOURCE PUBLICATIONS

My Child's Brain Injury, Brain Injury Association of New York State (2003).

Working with School Districts, Brain Injury Association of New York State (2003).

Traumatic Brain Injury: A Guidebook for Educators, New York State Education Department (1997).

A Guide to Being Heard, Brain Injury Association of New York State (2003).

AGENCY RESOURCES

N.Y.S. Education Department; Office of Vocational and Educational Services for Individuals with Disabilities (VESID)
 One Commerce Plaza
 Albany, NY 12234
 800-222-5627 • 518-474-2714
www.vesid.nysed.gov/ (then click on VESID)

N.Y.S. Commission on Quality of Care (CQC)
 401 State Street
 Schenectady, NY 12305
 800-624-4143 • 518-383-2888
www.cqc.state.ny.us

N.Y.S. Office of Mental Retardation and Developmental Disabilities (OMRDD)
 Statewide TBI Coordinator
 44 Holland Avenue
 Albany, NY 12229
 518-474-8652
www.omr.state.ny.us

Resources for Children with Special Needs
 200 Park Ave. South, Suite 816
 New York, New York 10003
 Telephone: 212-677-4650
 Web Site: www.resourcesnyc.org

National Information Center for Children and Youth with Disabilities (NICHCY)
 P.O. Box 1492
 Washington, DC 20013
 Telephone: 1-800-695-0285 (voice/TTY) • Fax: 202-884-8441

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