Cognitive Impairment/
TBI in the HCH Setting

Brooks Ann McKinney, MSW Alexandra Hartfield, BSW



## How it all started....

# case study of 3 brothers



#### The Facts

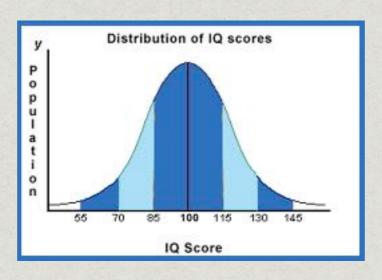
- \* Cognitive impairment often goes undocumented which prevents health professionals from understanding their patients and can prevent access to services and/or SSI/SSDI.
- \* Cognitively-impaired people have difficulty with one or more of the basic functions of their brain, such as perception, memory, concentration and reasoning skills.
- \* Common causes of cognitive impairment include Alzheimer's disease and related dementias, stroke, Parkinson's disease, brain injury, brain tumor or HIV-associated dementia.

# Challenging Behaviors and CI/TBI

- \* Individuals with cognitive impairment may experience a range of behavioral problems that can be frustrating for caregivers.
- \* These might include communication difficulties, perseveration (fixation on/repetition of an idea or activity), aggressive or impulsive behaviors, paranoia, lack of motivation, memory problems, incontinence, poor judgement and wandering.

- 144
- 0.13%
- Gifted
- 130-144
- 2.14%
- Above average
- 115-129
- 13.59%
- Higher average
- 100-114
- 34.13%
- Lower average
- 85-99
- 34.13%
- Below average
- 70-84
- 13.59%

# Average IQ in Population



### Our Research HCH Clinic in Raleigh, NC

- \* 80% of patients tested had an IQ of 70 or lower.
- \* This is classified as MR under the label of SSA.
- \* DSM V will be changing it to intellectual developmental disorder
- \* 66% were under 60
- \* This is consistent with other studies

#### Questions to ASK

- \* Were you in special ed classes?
- \* Did you have to get help in school?
- \* Were you in a separate classroom or with a teacher one on one?
- \* Did you have a hard time reading in school?

#### How it happens....

- \* LCSW, FNP, or MD at HCH clinic will screen patient and call SOAR representative
- \* SOAR=Social Security Outreach and Access to Recovery-SAMSA
- \* Soar worker comes on site to meet individual
- \* Takes client to psychologist to get IQ testing.
- \* Trust has to be earned with client so they feel comfortable with going with you.

#### Process for SOAR

- \* Fax request to SSA office manager.
- \* Make a face to face interview. SSI you CANNOT do online. Only SSDI, for someone with work history can apply online..
- \* Transport client and advocate for them...SSA worker will take observations! They may receive presumptive disability...

#### SOAR process cont'd

- \* Application will to state DDS office where you will send all records.
- \* Sometimes you need daily contact with worker until every is received.
- \* Will need to feel out ADL reports, get Dr to sign off on any notes....
- \* Once benefits approved..payee, housing,etc.

# Social Security Disability: the Key

- \* 12.05 Mental retardation: Mental retardation refers to significantly subaverage general intellectual functioning with deficits in adaptive functioning initially manifested during the developmental period; i.e., the evidence demonstrates or supports onset of the impairment before age 22.
- The required level of severity for this disorder is met when the requirements in A, B, C, or D are satisfied.
- A. Mental incapacity evidenced by dependence upon others for personal needs (e.g., toileting, eating, dressing, or bathing) and
  inability to follow directions, such that the use of standardized measures of intellectual functioning is precluded;
- · OR
- B. A valid verbal, performance, or full scale IQ of 59 or less;
- · OR
- C. A valid verbal, performance, or full scale IQ of 60 through 70 and a physical or other mental impairment imposing an additional and significant work-related limitation of function;
- · OR
- D. A valid verbal, performance, or full scale IQ of 60 through 70, resulting in at least two of the following:
- 1. Marked restriction of activities of daily living; or
- 2. Marked difficulties in maintaining social functioning; or
- · 3. Marked difficulties in maintaining concentration, persistence, or pace; or
- 4. Repeated episodes of decompensation, each of extended duration.

#### SSI/SSDI evidence

- \* Once you receive IQ score, fax to SSI worker immediately
- \* Get school records ASAP. Sometimes you may have to go to the school. You may have to be consistent about this, especially in rural counties.
- \* Collect all medical records from local hospital, HCH site, and/or any other medical or mental facility. You may have to call out of state...

#### Case Study #1

- \* Darryl
- \* lived behind a garage with 2 brothers in a car
- \* Alcoholic
- \* no primary care for over 20 years
- \* Lived in the woods for 15 years

# How to Get a Psychologist

- \* Project Access programs
- \* Psychologist Associations
- \* They are supposed to do community hours
- \* Form a relationship and share the success
- \* ex: I would get clients to write thank you notes
- \* Let them know that this does change lives!

### How CI affects Behaviors In a Shelter Setting

- \* Client may not understand directions, certain rules, and/or schedules
- \* These behaviors may sometimes be taken as manipulative or non compliant
- \* This can cause anger, sadness, lack of confidence to finish program or stay sober

#### Behavior Interventions

- \* Anticipating that there will be ups and downs, and maintaining patience, compassion and a sense of humor will help you cope more effectively with difficult behavior.
- \* It's important to remember that it's the disease, not the person, causing the behavior.

#### Behaviors Cont'd

- \* Some people may develop behavioral problems early on, while others go their entire illness with only minor issues.
- \* Most cognitively impaired persons fall somewhere in the middle, having good days and bad days (or even good or bad moments).

#### What Can Help

- \* Educate staff on CI and TBI about the behaviors that may be misinterpreted
- \* Instruct case managers/staff to see what helps the client in remembering(sticky notes, calendar, alarm)
- \* Staff must BE PATIENT and may have to remind clients repeatedly. Communication must be simple. (Please sit here, Time to eat, etc)

## How this relates to the COC

- \* Once patient is flagged in HCH clinic, referral can be made for respite if there are other presenting health issues.
- \* While in medical respite bed, schedule IQ testing and schedule interview at SSA
- \* Once benefits received, can apply for Housing First, family group home, assisted living...
- \* This can stop the cycle...ending homelessness!

#### Back to Darryl

- \* Success Story
- \* Lives in his own home
- \* Gets around on his scooter
- \* Slept on floor first week
- \* Helps do labor in neighborhood
- \* Wanted to be paid with pizza and beer!



### Resources and Special Thanks

- \* National Center on Caregiving, www.caregiver.org
- \* Special thanks to Mary Anne Hartye, PhD, for giving her time to do the testing with our patients.
- \* All of our clients!