

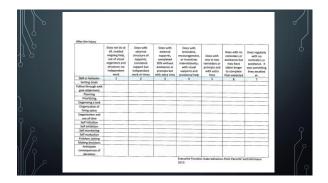


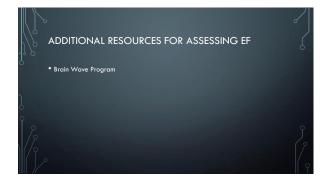
	EXECUTIVE FUNCTION DEFINED	
0	 "The term 'executive' implies a higher order supervisory capacity that directs a person's actions" according to multiple authors (in Parente' and Herrmann, 2010). 	
) o	 Multiple skills are involved with enabling each of us to direct and regulate our own actions. The combination of these skills define our level of social 	
	competence.	

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$\left \left \right \right $	SKILLS DEFINING SOCIAL COMPETENCE	
D/°	Controlling behavior	
1°°	Organizing behaviors and information	
O	Setting goals	
	Prioritizing Executing plans	
1	Awareness of presentation to others	
	Initiating and/or inhibiting	
Y	Thinking strategically and sequentially	
_	Evaluation progress toward goals	
Υ	Problem solving	
12	Being able to see different perspectives (non-egocentric thinking)	
1/7	 Generalize newly learned skills to novel situations (all referenced in Parente' and Hermann) 	
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// _?	ASSESSMENT OF EF	
\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	 There are several assessments for EF available but most assess all of the underlying skills that contribute to EF and don't provide a comparison of ability prior to the injury. Most assessments are in the neuropsych realm. 	
	Parente' and Herrmann (2010) suggest asking family key questions related to before and after may yield the most information.	

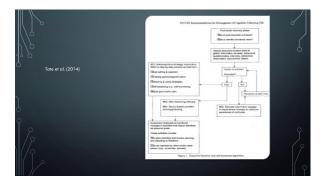
	use of visual organizers and structure; no independent work	supports, consistent support but some independent work at times	supports, completed SO% without assistance or prompts but with extra time	or incentives intermittently; with visual supports and occasional help	Did with one or two reminders or prompts and with extra	reminders or assistance but may have taken longer to complete than expected	with no reminders or assistance. I was something they excelled
Skill or behavior	1	2	3	4	5	6	7
Setting Goals							
follow through with goal							
attainment							
Planning							
Prioritizing							
Organizing a task							
Organization of Bring space							
Organization and use of time							
Self Initiation							
Self inhibition							
Self monitoring							
Self evaluation						_	
Problem solving							
Making decisions							-
Anticipate							
consequences of decisions							





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	ASSESSING SOCIAL LANGUAGE	
0	Several Questionairre's and Scales available	
	Great resource for professionals and for education.	
	http://www.tbicommunity.org/resources/publications/professional_education_	
9	social_comm.pdf	
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	INTERVENTION GUIDELINES FOR EXECUTIVE	
	FUNCTION	
	 "Metacognitive strategy training should be used with adults with TBI for difficulty with problem solving, planning, and organization. These strategies should be focused on everyday problems and functional outcomes. Metacognitive strategy instruction is always optimized when the patient has awareness of the need to use a strategy and can identify contexts in which the strategy should be used. Common elements of all metacognitive strategies 	
	are self-monitoring and incorporation of feedback into future performance" (Tate et al. 2014)	





9	Specific Activities, Devices, and Tools include	
	Psychoeducation	
	Goal identification	
	Anticipate, plan, and select strategies to achieve goals	
)	Predict and evaluate performances	
4	Therapist feedback on performances	
_	Train using functional everyday activities	
Y	Environmental manipulation	
1 9	Use of checklists	
Γ/ρ	Rehearsal	
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	Intervention with executive function from parente' and herrmann (2010)	
9	Self Monitoring	
	Goal Setting	
	Social Competence	
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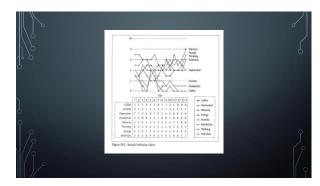
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	METACOGNITION	
	Being able to think about thinking	
	 Static – a person's awareness of their ability or difficulty in the area of cognitive processing and their strategies or techniques they could use to support their processing. 	
	 Dynamic – their ability to exercise control of cognition by initiating and applying the appropriate strategy/action. 	
	 The process of re-teaching involves mastering static and dynamic metacognition. 	

The individual will likely have difficulty with foundational skills underlying the Executive Function. Will need to deal with those prior to or concurrently, depending on the individuals level of difficulty in EF and other areas. Attention Memory	
depending on the individuals level of difficulty in EF and other areas. • Attention	
Attention	
• Memory	
Organization	

	SELF MONITORING	
Q	Charting	
	Predicting performance and evaluating performance	
	Videotaping	
	Verification	
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	CHARTING	
0	Identify behaviors (client with coaching as needed)	
	Create rating scales for each behavior	
	Create rating form/s with correlated behaviors together	
o -	Create graph to provide a visual	
	• Teach them how to chart and graph and then review this at sessions	
1/9	Work on predicting in this process	
\\\/Ŷ		

TING FORM AND GRAPH	
Coffee (company day)	7
Coffee (cups per day)	
Anxiety (1 = low to 10 = high)	
Depression (1 = low to 10 = high)	
Headaches (0 = none to 10 = severe)	
Memory (1 = poor to 10 = excellent)	
Thinking (1 = poor to 10 = excellent)	
Energy (1 = low to 10 = high)	





	VIDEOTAPING	
O	Videotape a session or interaction	
	Review it later with the individual	
)	• Incorporate	
9	Checklists	
Q	Rating scales	
9	• Predictions	
1/9	Evaluation of performance in certain behavior or area	

	VERIFICATION	
δ.	Using clarification strategies	
	• Assists with knowing how to self monitor verbal interactions	
	Helps others note comprehension difficulty	
٥ ٥	Prevents miscommunications	

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	GOAL SETTING	
8	 Assisting them with identifying their long term goal and then subgoals from there. 	
1	Goals need to be tangible, concrete and measurable	
9	• G – O – A – L mnemonic	

	IDENTIFICATION OF GOALS	
Ò	• Long term	
	• Sub-goal/s	
	• Plan to achieve goals	
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	GOALS NEED TO BE:	
Ò	Concrete	
	Time limited	
	Action plan	
]	Record progress	

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	MNEMONIC	
0	Go over goals daily	
	Order goals	
)	Ask yourself questions everyday	
9	• Look at your goals every day	

GOAL PLAN DO REVIEW PAGE 1	
GOAL PLAN DO REVIEW PAGE 2	
PROBLEM SOLVING TEMPLATE	

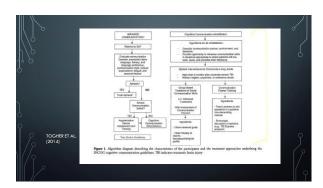






	RESEARCH IN SOCIAL LANGUAGE WITH ADULTS	
Q	There is limited research in the area of social language post TBI	
	Finch et al (2016) did a systematic review of interventions with social communication difficulty post TBI	
	 Remediation of social communication skills in people with traumatic brain injury can be beneficial. Evidence is greatest for context-sensitive approaches delivered predominantly in group settings. 	
9	There is a need for further high-quality studies in this area.	
0	• http://www.tbicommunity.org/resources/publications/professional_education_social_comm.pdf	
	There is a great deal more research into social language with individuals with ASD	

INTERVENTION GUIDELINES FOR COGNITIVE COMMUNICATION • Treatment – appropriate intervention by an SLP • Education – include education and training/teaching of communication partners • AAC – individuals with severe communication impairment should be provided with AAC by an SLP and access to devices by OT's. • Participation in daily social activities – intervention is recommended to address patient identified goals in the area of social communication. Outcomes measured based on participation in social life. Should be provided in group or individual settings but stronger evidence for group settings.



TRAITS OF SOCIALLY COMPETENT INDIVIDUALS	
Project a unique image Uncommon, competent, amendam, and manualla manualla Demonstrate sense of social control Patrix of Patrix Patrix social pressure	
Usten well Communicate well with others Respond to social feedback and change even if they don't like what others tell them	

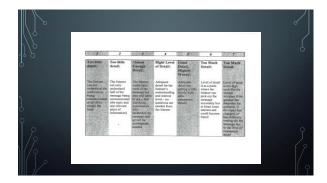
	TRAITS OF SOCIALLY COMPETENT INDIVIDUALS	
Ŏ	Consider history of a social situation before taking a stand or responding	
	• Understand the importance of timing of responses in social encounters	
)	Don't force themselves on others socially	
9	• Initiate friendships and relationships subtly	
	Praise friends appearance and accomplishments	
1/9	• Learn from errors and don't make same mistakes twice	











	LISTENING SKILLS	
作り		
9	Mnemonic in Parente' and Herrmann (2010)	
	• L – Look	
	• I – Interest	
	S – Speak 50% of time or less	
Q	• T – Try not to interrupt or change subject	
Q	• E - Evaluate	
9	 N – Notice body language and facial expression 	
	Use video recordings paired with prediction/evaluation ratings or scales	



TOPICAL CONVERSATION ACTIVITY SHEET	
TOPIC QUESTIONS/COMMENTS FOR CONVERSATION	
CONVERSATION RECORD	

	TEACHING COLLABORATIVE CONVERSATION		
_	• Elaborative organization by communication partner – scaffold support to		
	assist with organization		_
	Organize ideas in conversation		
]	Make connections when topics change	1733 1/2	_
0	 Make connections among day to day conversational themes 		
	Review organization of information		_

SIMPLE GRAPHIC ORGANIZER FOR NARRATIVE INFORMATION	



	o	
	APPEARANCE	
0	Social acceptance (dependent on culture)	
	Vocational appropriateness	
	Perhaps a guideline system based on context?	
1/2		

	PERSONAL TIME MANAGEMENT	
Ò	Attitude relative to time and social behavior	
	Discuss misconceptions	
	Point out behaviors as they occur	
)	Discuss principles of time management	
0	Implement visual supports/aids	



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	EXTERNAL AIDS	
9	Identify important features on planner/calendar	
1111	• Times	
	Lined spaces	
	Teach skills to become routine	
0	Check appointments each evening	
9	Organize the day	
1/2	Marking time	
₩/Y		

YVILSAKER AND FEENEY SCHEDULE TEMPLATE	

	RESOURCES	
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Ŭ	• www.understood.org	
	• <u>www.asha.org</u>	
	• http://www.tbicommunity.org/resources/publications/professional_education_	
9	social_comm.pdf	
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φ	disorders. SFK Books. Langley, BC. Canada.	

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Q	Publishing Company.	
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