

Brain Injury & Disability Resources

ABIN-PA InfoLine 800.516.8052
Abuse Reports—Age 0-18 800-932-0313
Abuse Reports—Age 18+ 800.490.8505
Aging/Disability Referrals 866.286.3636
Area Agency on Aging (blue pages)
BIAPA Resource Line 800.444.6443
BrainSTEPS (Local Intermediate Unit)
CareerLink (blue pages)
ChildrensHealthInsurance 800.986.5437
Consumer Protection 800.441.2555
Crime Victim's Benefits 800.233.2339
Defense & Veterans BIC 866.966.1020
Disability Rights Network 800.692.7443
DomesticViolence Hotline 800.799.7233
Elks Nurses (care plans) 814.781.7860
Epilepsy Foundation 800.887.7165
Head Injury Program 717.772.2762
(1 year of rehab, \$100,000 max)
Health Insurance www.healthcare.gov
or 800.318.2596
Health Law Project 800.274.3258
Independent Living Ctrs 717.364.1732
Legal Aid (PA) 800.322.7572
Legal Clinic for Disabled 215.587.3350
Meals on Wheels www.mealcall.org
Medical Assistance 800.537.8862
Medicare Coverage 800.633.4227
(Part A & B have in-home services)
Medicare Complaints 800.783.7067
Office of Vocational Rehab (blue pages)
OVR Complaints 888.745.2357
Social Security 800.772.1213
Special Ed Consult Line 800.879.2301
Special Kids Network 800.986.4550
Waiver Enrollment 877.550.4227
Waiver HelpLine 800.757.5042
Women's Law Project 215.928.9801

ABIN-PA Services

"Empowering Survivors & Families to Rebuild Their Lives."

InfoLine

Resources. Problem-solving. Support.

Advocacy

Individual. Government Affairs.
Nonprofit Coalitions & Collaboratives.

Education

Conferences. Presentations.
Staff Training.

Literature

Free Monthly Newsletter.
Brochures.
Booklets.
PowerPoints.

Website

Newsletter Archives & Sign-Up.
Print Literature.
"Our Stories."
Print Resource List by Birthdate.
Rehab Facility Search by Type.
Videos.

Brochure Categories

General
Children <21
Adults 18+
Families & Caregivers
Rehabilitation
Dual Diagnosis
Justice System

Brain Injury Advisory:
Adults 18+

SELF-DIRECTION IS YOUR GOAL



ABIN-PA is dedicated to increasing public awareness about acquired brain injury and to providing support, education, information, advocacy and other services for individuals with acquired brain injury and their families.

ACQUIRED BRAIN INJURY NETWORK OF PENNSYLVANIA

InfoLine: 215.699.2139
Toll-Free: 1.800.516.8052
info@abin-pa.org
www.abin-pa.org

Starting Point

Everyone starts at a particular place in the brain injury continuum, and advances as recovery proceeds.

1. Hospital—medical treatment
2. Critical Care Facility—ventilators
3. Nursing Home—coma, skilled care, minimal rehabilitation
4. Acute Rehabilitation Hospital—3 hours/day physical & cognitive rehabilitation
5. Brain Injury Rehabilitation Provider—CARF accredited, rehab includes physical & cognitive, may be residential or a group home
6. At Home—outpatient rehab, personal assistance, family supervision, family physician
7. At Home—outpatient rehab, independent, family physician
8. At Home—-independent, family physician, work/volunteer

Medical Recovery

At some point, medical recovery from the accident, stroke, illness or other event causing the brain injury will be complete and any remaining issues can be managed, perhaps with regular follow-ups with a specialist or the family physician. At that point, the goal of rehabilitation will be to regain the cognitive function needed to lead an active, productive life.

Functional Recovery

Formal and informal rehabilitation plus time, personal determination, and the support of family and friends will be needed for many years.

When we become aware of the following milestones, we know self-direction is emerging, even though further work on impairments may be needed:

- Aware of physical surroundings
- Concentrates as needed
- Personality is fairly consistent
- Personal responsibility is evident
- Considers feelings of others
- Can consider two or more ideas
- Understands cause and effect
- Implications are captured
- Insight is evident
- Uses daily planning & pacing

Taking Responsibility

Once self-direction is possible, the individual will gradually take on more responsibility while continuing to address remaining impairments. Further recovery requires increasing responsibilities, but safety must come first. The individual must know when to ask for help or further directions. Roles with others must be flexible and role negotiations will be ongoing until behavior and skills are consistent.

Cognitive Budgeting

Each task requires different skills, and some skills may take more effort than others. Since there is a more limited amount of energy and attention each day after a brain injury, planning is essential. Know the amount of effort required by each activity you are planning.

Pacing the day/week

Plan your difficult tasks at the time of the day and week when you have the most energy. Plan activities with low energy costs for the rest of the day. Plan time for rest and relaxing activities. Be on the alert for days when fatigue or illness requires an adjustment in your plans.

Avoiding Meltdowns

Through cognitive budgeting and pacing, you can be at your best most of the time. Watch out for changes in your routine that can throw off your plans. Be aware that rushing or emotional challenges might cause you to become overwhelmed and less effective. When trouble arises, put aside your plans and recover your emotional balance through easy activities that you enjoy. Once your balance is re-established, proceed.