# **Outline**

# THE FRAMEWORK AND SCIENCE OF COGNITIVE REHABILITATION: NOT ALL BRAIN GAMES ARE REHABILITATION

Associated brain regions and functions Compensatory vs. restorative strategies Cognitive stimulation, cognitive training and cognitive rehabilitation

# ASSESSMENT APPROACHES FOR COGNITIVE DECLINE

Brain plasticity and the latest research

What the MOCA and SLUMS are telling you and not

When to refer for a full neuropsychological assessment Make the most of assessment results including neuropsychology reports

Static (TBI / stroke) vs. progressive decline (Alzheimer's disease): Set and maintain realistic treatment goals

Taking care to not "over-pathologize" concussions: Know the difference between concussion, TBI, CTE and dementia

The use of mood and personality measures

# INTERVENTION APPROACHES FOR BARRIERS TO REHABILITATION: MOOD, MOTIVATION & ANXIETY

Motivational interviewing to cultivate engagement and brain health interventions

Treat anxiety and false beliefs to improve cognition Adjustment to illness and grief: Counseling the brain impaired patient

# THE COGNITIVE DECLINE TOOLBOX: Real World Treatment Strategies for Each Cognitive Domain

## ATTENTION & WORKING MEMORY

The neural bases of attention impairment Help clients understand working memory capacity as a means of improving metacognition

Improve attention and reduce errors by following the DIRECT model and using PEAS & LEAP

"Focused drilling" to expand working memory capacity and generalizing to other outcomes Mindfulness training to help clients shape attention and

improve focus

## Target Audience: Social Workers

Psychologists • Counselors • Neuropsychologists Occupational Therapists • Physical Therapists Speech-Language Pathologists • Nurses Nursing Home Administrators Assisted Living Facility Administrators

Long Term/Acute Care Professionals
Case Managers • Marriage & Family Therapists

## MEMORY: PROSPECTIVE, ENCODING & RECALL

The neural bases of memory impairment
Frontiers in Alzheimer's disease management
Tailor memory training interventions to level of severity
& motivation

Effective use of calendars and other external memory aids for effective daily functioning

Elaborative encoding techniques using visualization, linking and chunking

Memory aids in traditional psychotherapy treatments Strategies for effective recall of learned information

## **EXECUTIVE FUNCTION**

The neural bases of executive function impairment Stroke and cerebrovascular disease

Improve planning for greater goal attainment with the use of a reverse timeline worksheet

Expand flexible thinking with 6-step problem solving The neural basis of stress management and emotion regulation

### **VISUOSPATIAL & LANGUAGE**

The neural bases of visual and language impairment Useful Field of View Training (UFOV) for driving independence

The "language wallet" for independence among people with aphasia

Supported conversation and script training for aphasia

## HOLISTIC BRAIN HEALTH INTERVENTIONS

Shape the brain's destiny: Cognitive reserve to build resistance and resilience to cognitive decline
The impact of socialization on brain health and recovery
Psychotherapy's impact on brain health
Effective cognitive stimulation: The truth about brain games & crosswords

Teach clients how their brain works through metacognition intervention

RESEARCH, LIMITATIONS AND RISKS

## **Live Webcast Schedule**

(Times listed in Central)

**8:00** Program begins **11:50-1:00** Lunch Break

**4:00** Program ends

There will be two 15-min breaks (mid-morning & mid-afternoon).

Actual lunch and break start times are at the discretion of the speaker.

A more detailed schedule is available upon request.

# **Objectives**

**Psychiatrists** 

- 1. Evaluate the usefulness of cognitive screeners such as the MOCA and SLUMS versus when to refer out to a qualified neuropsychologist for a comprehensive neurocognitive assessment.
- 2. Design treatment interventions based on realistic treatment goals and the evidence supporting compensatory vs. restorative strategies and determine the difference between cognitive stimulation, cognitive training and cognitive rehabilitation.
- 3. Determine the impact of client anxiety and false beliefs to inform the clinician's choice of treatment interventions and clinical outcomes.
- 4. Utilize motivational interviewing techniques and appropriate selection of rehabilitation interventions to improve client engagement.
- 5. Utilize specific interventions to enhance attention, memory, visuospatial, language and executive skill functioning to improve client level of functioning.
- 6. Implement treatment interventions to improve holistic brain health in clinical settings.





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# Clinical Action for Dementia, TBI, Concussion, Stroke and Other Cognitive Declines

Assessment and Treatment Techniques for Cognitive Rehabilitation and Neuroplasticity

# **LIVE Interactive Webcast**

Thursday, September 17, 2020

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# Clinical Action for Dementia, TBI, Concussion, Stroke and Other Cognitive Declines

Assessment and Treatment Techniques for Cognitive Rehabilitation and Neuroplasticity

Featuring, Sherrie All, Ph.D.

# Real world clinical techniques, interventions and strategies to:

- Expand and improve attention and working memory, memory encoding and recall, visuospatial and executive functions and language
- Accurately read and use assessment and neuropsychology reports
- Prioritize cognitive, behavioral and emotional interventions and implement effective treatment plans

# **LIVE Interactive Webcast**

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# Clinical Action for Dementia, TBI, Concussion, Stroke and Other Cognitive Declines

The treatment landscape for dementia and brain related cognitive interventions is rapidly changing, making it difficult to stay abreast of treatments that work and those that have been over-hyped. With the popular understanding of brain plasticity increasing while concussion-related conditions are gaining a wealth of media focus, patients are looking to you to help them separate fact from fiction about brain health and rehabilitation.

Using the latest science, Dr. All will teach you practical interventions to best help your clients build and maintain cognitive skills and functional independence. You will leave the day with a comprehensive toolbox of evidencebased cognitive rehabilitation interventions and the skills you need to match them to the cognitive domains for which they are most effective.

Drawing on over 15 years of clinical experience, Dr. All will teach you techniques and interventions to effectively:

- Assess for cognitive decline and accurately interpret complicated assessment reports
- Determine when to refer out to a specialist for more detailed assessment
- Put the recommendations of a neuropsychological report into action
- Create actionable treatment plans to immediately start helping your clients
- Expand working memory and enhance attention, generalizing to real-world functioning
- · Improve memory encoding, consolidation, and retrieval to improve client independence
- Expand executive functions including planning and problem solving to promote flexible thinking
- · Improve visuospatial function and language to enhance client independence and social functioning

Walk away with practical and useful techniques that can be implemented immediately within your practice. Sign up today and start feeling confident in delivering the rehabilitation interventions your clients facing cognitive decline so desperately need!

## Speaker

**Sherrie All, Ph.D.,** is a Licensed Clinical Psychologist specializing in neuropsychology, cognitive rehabilitation and brain health. She owns and directs the Chicago Center for Cognitive Wellness (CCCW), a group neuropsychology practice offering assessment and treatment services in cognitive rehabilitation and psychotherapy to people affected by cognitive decline. As a leader in the field of brain health, Dr. All works to educate the public on brain-healthy behaviors and innovating brain health coaching. Her work in this area earned her the 2010 Sharpbrains Innovation Award for Most Innovative Mental Health Program as well as the attention of media outlets such as The New Yorker and Crain's Chicago Business.

Dr. All trains other professionals in how to implement cognitive rehabilitation interventions into their practice, through continuing education programs, supervision and individual consultations. She shares her detailed understanding of the brain and brain-behavior relationships in an engaging and relatable way. Dr. All's forthcoming book and current keynote address, "Brain Destiny: Everyday Choices to Lower Your Risk for Dementia and Change Your Life", offers an entertaining way of promoting a popular understanding of the scientific theory of cognitive reserve to empower people to effectively care for their brains. She has been an invited speaker by the Lifetime Education and Renewal Network (LEARN) of the of the American Society on Aging (ASA) and speaks regularly on the topics of brain health, cognitive rehabilitation and interventions for early-stage dementia. Dr. All's research includes examination of functional MRI (fMRI) and electrophysiological (EEG) biomarkers of cognitive deficits.

Speaker Disclosures:

Financial: Sherrie All is the owner of the Chicago Center for Cognitive Wellness. She receives a speaking honorarium from PESI, Inc. Non-financial: Sherrie All has no relevant non-financial relationship to disclose.

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Marriage and Family Therapists: AK, AL, AR, AZ, CA, CO, FL, IA, IL, IN, KS, ME, MI, MO, MT, NC, NH, NJ, NM, NV, NY, OH, PA, RI, SC, SD, TN, TX, UT, WY

Nurses: All States

Psychologists: AK, AR, AZ, CA, CO, CT, DE, FL, GA, HI, IA, ID, IL, IN, KS, KY, MD, ME, MI, MO, MS, MT, NC (Category B), NE, NH, NJ, NM, NV, NY, OH, OK, OR, PA, SC (Category B), SD, TN, TX, UT, VA, WA,

Psychiatrists: All States

Social Workers: AK, AL, AR, AZ, CA, CO, CT, DC, DE, FL, GA, HI, IA, ID. IL, IN, KS, KY, LA, MA, MD, ME, MI, MN, MS, MT, NC, ND, NE, NH, NM, NV, NY, OH, OK, OR, PA, SD, TN, TX, UT, VA, VT, WA, WI, WY

Speech Language Pathologists: All States

Physical Therapists: AK, AZ, CA, DE, IL, KY, MI, NC, NY, PA, TX, UT, VA

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This course is offered for .6 ASHA CEUs (Intermediate level, Professional area). \*\* Please note that Speech-Language Pathologists must complete the post-test and evaluation within two weeks of attending the live event if they would like their participation submitted to the ASHA CE Registry. Detailed instructions will be provided the day of the program under the Handouts section of the online program

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## CLINICAL ACTION FOR DEMENTIA, TBI, CONCUSSION, STROKE AND OTHER COGNITIVE DECLINES

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