



THE VOICE OF BRAIN INJURY

brain injury AUSTRALIA
braininjuryaustralia.org.au

9th National Brain Injury Conference

Adelaide Oval, South Australia

Tuesday 24th - Thursday 26th September 2024



@braininjuryaustralia



@BrainInjuryAus

Post & Share on Social: #braininjuryconference24

Conference Program

Partners



Business
Events
Adelaide



Government of South Australia

Department of the Premier
and Cabinet

Gold Sponsor

Lifetime
SUPPORT

Breakfast Silver Sponsor

Abbott

Silver Sponsors



The Hospital Research
Foundation Group
Stroke

scia

Spinal Cord Injuries Australia

Supported By



Brain Injury SA.



University of
South Australia

Brain Injury Australia
Proudly Supported By

ZERO

Conference Producer

interpoint
EVENTS

www.braininjuryconference.com.au

THE PREVALENCE OF ACQUIRED BRAIN INJURY AMONG VICTIMS AND PERPETRATORS OF FAMILY VIOLENCE

“Domestic and Family Violence is a significant cause of brain injury. Around 40 per cent of the 16,296 victims of family violence attending Victorian hospitals over the 10 years from July 2006 to June 2016 sustained a brain injury.”

Available from: www.braininjuryaustralia.org.au

WELCOME

Welcome to Brain Injury Australia's 9th National Brain Injury Conference. I thank the presenters to the Conference for giving so generously of their time and for sharing their expertise and experience. The National Brain Injury Conference has become one of the premier learning and development events on the disability calendar – driving improvements in services and supports for the over 700,000 Australians living with an Acquired Brain Injury (ABI) - *only* because Brain Injury Australia relies on the work of researchers, clinicians and allied health professionals and people with lived experience of the disability. And Brain Injury Australia *never* takes that for granted. I'd like to especially acknowledge those speakers and delegates with lived experience of brain injury, their families and carers - the greatest number of both attending, *and* presenting, in the Conference's history.

Founded in 1986, Brain Injury Australia is the nation's peak advocacy organisation. Alongside providing policy advice to Commonwealth, State and Territory governments, and representing people with a brain injury on a range of advisory groups, Brain Injury Australia also drives multi-year public education campaigns, on: women, Family, Domestic and Sexual Violence and ABI; Traumatic Brain Injury (TBI) in the military (1 in every 10 Australian Defence Force personnel who served in the Middle East reported a post-deployment TBI); concussion in sport; the leading cause of death and disability in children who have been abused – inflicted TBI (sometimes referred to as “Shaken Baby Syndrome”); the leading cause of TBI throughout the developed world - falls, due to the ageing of populations; and people with a brain injury in the criminal justice system (as many as 80 per cent of adult prisoners report one or more brain injuries). Between 2017 and 2019, Brain Injury Australia also facilitated a national “community of practice” in brain injury for the National Disability Insurance Agency (the independent statutory agency whose role is to implement the National Disability Insurance Scheme); regular meetings of Local Area Coordinators and Agency planners with senior Agency staff, a Clinical Lead and allied health representation. In April 2024, Brain Injury Australia was appointed to the Australian Government Medical Research Future Fund's Traumatic Brain Injury Mission Expert Advisory Panel.

This Conference has only been made possible through the support of sponsors and exhibitors - Business Events Adelaide (funded by the Government of South Australia and the City of Adelaide), the Lifetime Support Authority, Abbott, the Hospital Research Foundation Group, Spinal Cord Injuries Australia, Brain Injury SA, Brazier Mobility, the National Assistance Card, Pop-Up Health, All About Caring, CXDX Connected Diagnostics, Drake Medox, SA Care, Connectivity, Add-Life Technologies, MePACS, I Can Jump Puddles, National Relay Service and One Rehabilitation Service.

Brain Injury Australia is also grateful for funding received from the Australian Government's Department of Social Services' National Disability Conference Initiative, to support the Conference attendance of people with a brain injury, their families and carers.

Thank you for taking the time to attend. So it can continuously improve, if there's anything you didn't like about this Conference please let me know. And if you liked the Conference please let somebody else know to attend the 10th National Brain Injury Conference to be held in 2026, at a (highly desirable) location to be determined.



Nick Rushworth
Executive Officer
Brain Injury Australia
Conference Chair
nick.rushworth@braininjuryaustralia.org.au



Tuesday 24th September 2024

9:30– 4:30

PRE-CONFERENCE WORKSHOPS

CONCUSSION/ “MILD” TRAUMATIC BRAIN INJURY; A PRACTICAL WORKSHOP ON OPTIMISING MULTIMODAL ASSESSMENTS

As many as 180,000 “mild” Traumatic Brain Injuries, including concussions, occur in Australia each year. They can be hard to diagnose and even harder to treat – particularly in those injured who don’t make a complete recovery within expected timeframes, and due to the potential cumulative impacts of multiple concussions. This Workshop will provide attendees with guidance on the latest evidence-based best practices for the diagnosis, ongoing assessment and management of concussion/ “mild” Traumatic Brain Injury.

DOMESTIC AND FAMILY VIOLENCE AND BRAIN INJURY

Women and children who have sustained brain injuries the result of domestic violence are an emerging cohort in urgent unmet need of service responses. Australian-first research conducted by Brain Injury Australia found 2 in every 5 of the 16,000 victims of domestic violence attending Victorian hospitals over a decade had sustained a brain injury. This Workshop will enable attendees to identify, assess and respond to potential domestic violence-related Traumatic Brain Injury – the result of external force applied to the head – and hypoxic-anoxic brain injury – the result of deprivation of the supply of oxygen due to strangulation.

BEHAVIOURAL DISABILITY FOLLOWING BRAIN INJURY – AN INTRODUCTION TO POSITIVE BEHAVIOUR SUPPORT PLUS (PBS+PLUS)

“Challenging behaviours” – including impulsivity, irritability, verbal and physical aggression – are a common consequence of an Acquired Brain Injury (ABI). These behaviours are reported by survivors and their families as being *the* most disabling aspect of their ABI. The more severe the ABI, the more severe the behaviours and, left unchecked, they can worsen with time. The presenters of this Workshop helped conduct the world’s first randomised controlled trial of PBS in adults with an ABI. Out of that research grew an approach called “PBS+PLUS” – a person-driven approach where clinicians work collaboratively and on an equal level with the individual with an ABI and the people in their everyday life – that’s been associated with reductions in behaviours, improved close other self-efficacy in addressing behaviours and the attainment of personal goals and positive intervention experiences for people with an ABI.



Jon Patricios



James McLoughlin



David Stevens



Luke Ivens




Tania Straga



Jemson Ledger



Nicole Eglinton



Lauren Iasenzaniro




Julia Treleaven




Eve Valera




Julienne Long



Michael Buckland



Kate Gould



Nadine Holgate



Liz Williams



Lauren Bannard



Joshua Butler

1 Brain Injury Conference 2024

CONFERENCE PROGRAM

To find out more about each speaker, please visit <https://braininjuryconference.com.au/speakers/>


Wednesday 25th September 2024

BREAKFAST SYMPOSIUM – BROUGHT TO YOU BY ABBOTT

“Blood-based biomarkers to aid management of suspected mild Traumatic Brain Injury (mTBI)” – Dr. Stuart McDonald, “International clinical adoption of the Abbott mTBI Biomarkers” – Dr. Terence Moodley

(NB – attendance at this breakfast is by invitation only.)





Dr. Stuart McDonald



Dr. Terence Moodley

8:00

WELCOME TO COUNTRY

INTRODUCTION AND HOUSEKEEPING – Nick Rushworth (person with a brain injury), Executive Officer Brain Injury Australia, Conference Chair



Nick Rushworth

9:30

OFFICIAL OPENING – Nat Cook MP, South Australian Minister for Human Services



Nat Cook

9:45

JOINT CONSUMER OPENING ADDRESS AND INTERNATIONAL KEYNOTE ADDRESS – “Life after brain injury: what everyone should know” – Ché Phillips (person with a brain injury) and Bruce Powell (person with a brain injury) with Professor Mark Bayley, Coriat Family Chair in Rehabilitation Innovations at The University of Toronto, Canada



Ché Phillips



Bruce Powell



Mark Bayley










10.00

MORNING TEA

11.15

2 Brain Injury Conference 2024

Wednesday 25th September 2024

11.45	CONCURRENT SESSIONS 1		
THE DISCIPLINES – SOCIAL WORK <i>Canada’s Evidence-based Review of moderate to severe Acquired Brain Injury (ERABI) found a “multidisciplinary inpatient rehabilitation seems to be more effective than a single discipline approach”. The Conference draws attention to under acknowledged disciplines. Social workers in brain injury: provide counselling and emotional supports for the injured and their families; facilitate social supports, assist with community re-integration; and advocate for, and mobilise, resources to help individuals and their families meet the long-term challenge of maintaining community participation.</i>		CHILDREN “The rewards and challenges of working collaboratively to improve care and long-term outcomes after childhood brain injury” – Dr Louise Crowe, Lead of the Acquired Brain Injury flagship at Melbourne’s Murdoch Children’s Research Institute, with representatives from Victoria’s Transport Accident Commission, the Stroke Foundation, and Heads Together for ABI	
 Alyson Norman		 Louise Crowe	
THE FIRST PERSON – THE POWER OF PEER SUPPORTS <i>Connecting with others who share similar experiences of injury, recovery and adaptation can be a powerful antidote to the isolation that often accompanies brain injury. And the research into peer supports generally reports improvements in the quality of life measures and community integration of participants. But what “works”, what are the essential ingredients, in successful peer supports? The Conference hopes to provide some answers.</i>		 Lauren Spear	
 Kylie Smith		 Nat Linke	
 Miffy Durham		 Virginia Giddings	
 Gregg Oughton		 Deborah Byrne	

Wednesday 25th September 2024

12.30	CONCURRENT SESSIONS 2		
EMPLOYMENT <i>Around 2 in every 5 people who have sustained a Traumatic Brain Injury (TBI) find employment, 1 in 2 after a stroke. The last independent study of open employment services found that people with a brain injury had the second lowest representation in the workforce of all people with a disability and the third highest direct support needs (after people with autism and intellectual disability). And, while the total number of participants in Disability Employment Services has risen 7 per cent over the last 5 years, those with a brain injury have fallen 10 per cent. The Conference will share first person success stories while examining the key obstacles to, and some local innovations for finding, satisfying and sustainable employment for people with a brain injury.</i>		WHEN THE CHILD BECOMES THE CARER “Lessons from a child, now clinician, on living with a parent with a brain injury” – Alice Gersch, Queensland Health	
 Alice Gersch		 Adelene Yap	
 Kate Dawes		 Jennie Ponsford	
 Bill Fulton		 Michael McKenzie	
 Deborah Byrne		 Mardee Greeham	
 Miffy Durham		 Dee Honeychurch	
 Gregg Oughton		 Hailey McKirdy	



CORE DIAGNOSTICS

IT'S MORE THAN A TEST.
IT'S REAL LIFE. IT'S YOURS.



WWW.CORELABORATORY.ABBOTT
WWW.AUS.ABBOTT
(02) 9857 1111

©2024 Abbott. All rights reserved. All trademarks referenced are trademarks of either the Abbott group of companies or their respective owners.
Any photos displayed are for illustrative purposes only. Any person depicted in such photos may be a model.
ADD-151285-AUS-EN | 07/24














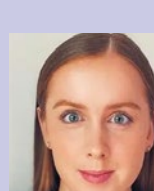
CONFERENCE PROGRAM

To find out more about each speaker, please visit <https://braininjuryconference.com.au/speakers/>

Wednesday 25th September 2024

1:15	LUNCH	
2:15	HALF-DAY WORKSHOP (2:15 – 5:30)	PLENARY (2:15 – 3:15)
	<p>INNOVATIONS IN SUPPORTING SUCCESSFUL COMMUNICATION AFTER BRAIN INJURY –</p> <p>Acquired Brain Injury Communication Lab at The University of Sydney: Professor Leanne Togher; Dr. Petra Avramovic; Dr Elise Bogart; Dr. Sophie Brassel; Dr. Liss Brunner; Dr. Rachael Rietdijk</p> <p>This Workshop will showcase innovations in evidence-based assessment and intervention for communication challenges following brain injury, based on research conducted by the Lab. Attendees will learn:</p> <ul style="list-style-type: none">the nature of cognitive-communication disorders after brain injury with reference to “TBI Bank” resources;the recently updated “INCOG” – named after an International group of Cognitive researchers and clinicians – clinical practice guidelines in this field; innovations in assessment of discourse;the application of evidence-based communication partner training programs such as “convers-ABI-lity” and “interact-ABI-lity”; anda model for identifying and addressing service-level communication barriers in healthcare settings; rehabilitation addressing social media use; and the potential for use of virtual reality in this field. <p>The presenters will share research findings and provide practical resources for clinicians. Attendees will have opportunity to plan how they might apply these evidence-based research advances to their own clinical service and practices.</p>	<p>FROM BENCH TO BEDSIDE TO BEDROOM: WHERE'S QUALITY AND HOW DO YOU FIND IT; AND WHAT'S BEST PRACTICE AND HOW DO YOU DO IT?</p> <p>Facilitated by Professor Mark Bayley, Coriat Family Chair in Rehabilitation Innovations at The University of Toronto Canada and Professor Jennie Ponsford, Monash University Victoria</p> <p>In 2019, the Australian Government invested \$50 million from its Medical Research Future Fund in “nationally co-ordinated medical research to improve the recovery of patients with a Traumatic Brain Injury”, and \$220 million “to bring together researchers, health professionals, industry and patients to make transformative improvements in heart and vascular health and stroke”. The Conference is interested in what happens to this research after it's completed – especially where what the research finds, if implemented, would directly benefit those living with the disabling consequences of brain injury. And, for those providing services and supports: how should they go about implementing the “best practice” evidenced from research; and what constitutes “quality”?</p>
	 <p>Mark Bayley</p>  <p>Jennie Ponsford</p>  <p>Jessica Trevana-Peters</p>  <p>Susan Hillier</p>  <p>Liesel Jeffers</p>  <p>Leanne Togher</p>  <p>Petra Avramovic</p>  <p>Elise Bogart</p>  <p>Sophie Brassel</p>  <p>Megan Topping</p>  <p>Cynthia Honan</p>  <p>Liss Brunner</p>  <p>Rachel Rietdijk</p>	<p>“Cognitive rehabilitation following Traumatic Brain Injury: an international survey of current clinician practice” – Dr. Jessica Trevana-Peters, Monash University Victoria</p> <p>“Understanding ‘quality’ in adult brain injury rehabilitation from the perspectives of different stakeholders: a participatory mixed methods study” – Professor Susan Hillier, University of South Australia</p> <p>“Health professional and consumer perspectives of the important features of a community brain injury rehabilitation service” – Liesel Jeffers, Northern NSW Local Health District</p> <p>“Bridging the gap: practical strategies for enhancing quality disability support grounded in lived experience” – Dr. Megan Topping, Summer Foundation Victoria</p> <p>“Developing Clinical Practice Guidelines for the treatment of psychosocial difficulties in adults with moderate-to-severe Traumatic Brain Injury” – Dr. Cynthia Honan, University of Tasmania</p>

Wednesday 25th September 2024

3:15	AFTERNOON TEA
3:45	CONCURRENT SESSIONS 3
<p>THE POWER OF PEER SUPPORTS</p> <p><i>Connecting with others who share similar experiences of injury, recovery and adaptation can be a powerful antidote to the isolation that often accompanies brain injury. And the research into peer supports generally reports improvements in the quality of life measures and community integration of participants. But what “works”; what are the essential ingredients, in successful peer supports? The Conference hopes to provide some answers.</i></p> <p>“Relationships, identity and social support: case examples and the role of peer support in sub-acute brain injury rehabilitation” – Jo Trandafil (person with a brain injury) and Dana Makrid (person with a brain injury) with Kate Dawes, South Australian Brain Injury Rehabilitation Service</p> <div>    </div> <p>Jo Trandafil Dana Makrid Kate Dawes</p> <p>“Lived experience of the impacts of peer support groups for adults with an Acquired Brain Injury” – Virginia Giddings (person with a brain injury), Brain Injury Matters and Dr. Lauren Kosta, University of Melbourne</p> <div>   </div> <p>Virginia Giddings Lauren Kosta</p> <p>“From isolation to connection” – Laura McMahon (person with a brain injury) and Locky Miller (person with a brain injury), Brain Injury SA’s Peer Mentor Program</p> <div>   </div> <p>Laura McMahon Lachlan (Locky) Miller</p> <p>“Heads Together for ABI’s online peer education; an innovative peer support resource demonstrating the power of partnership between lived experience, health, and research” – Kate Heine, Heads Together for ABI and Dr. Taylor Jenkin, University of Melbourne</p> <div>   </div> <p>Kate Heine Taylor Jenkin</p>	<p>SEXUALITY</p> <p><i>Sexuality is a crucial facet of life and goes well beyond sexual acts themselves, involving an individual’s psychological, physiological and social characteristics. Brain injury often impacts perceived sexual appeal, sexual drive, arousal and function. Yet, many injured feel uncomfortable to disclose and, research suggests, clinicians are reluctant or feel ill-equipped to explore matters sexual.</i></p> <div>  </div> <p>Saran Chamberlain</p> <p>“Let’s talk: having the hard discussions – sexual identity, mental health” – Saran Chamberlain (person with a brain injury), South Australia</p> <div>  </div> <p>Jill Hwang</p> <p>”Maybe if this was addressed sooner, maybe things might be different in our relationship? I don’t know. but who knows”; sexuality after Traumatic Brain Injury and its place in healthcare a qualitative exploration of survivors’ experience” – Jill Hwang, Monash University Victoria</p> <div>  </div> <p>Caitlin Fulton</p> <p>“Sexuality and rehabilitation needs following traumatic motor vehicle injuries: client and clinician perspectives” – Caitlin Fulton, Lifetime Support Authority South Australia</p> <div>  </div> <p>Jennie Ponsford</p> <p>“Co-designing for behavioural change: understanding barriers and enablers to addressing sexuality after Traumatic Brain Injury and mapping intervention strategies in a multi-disciplinary rehabilitation unit” – Professor Jennie Ponsford, Monash University Victoria</p> <div>  </div> <p>Elinor Fraser</p> <p>“Evaluating a novel Cognitive Behaviour Therapy intervention for sexuality changes after Traumatic Brain Injury” – Dr. Elinor Fraser, Monash University Victoria</p>

Wednesday 25th September 2024

4.45

CONCURRENT SESSIONS 4

BEHAVIOUR

Severe Traumatic Brain Injury can cause permanent and profound physical and cognitive disability. And for around half of the survivors of severe Traumatic Brain Injury, they will also manifest “challenging behaviours” (sometimes referred to as “behaviours of concern”): impulsivity; irritability; verbal, and sometimes physical, aggression. These behaviours are reported by survivors and their families as being the most disabling aspect of their brain injury. The more severe the Traumatic Brain Injury, the more severe the behaviours and, unchecked, they can worsen with time.

“Barriers, enablers and implementation strategies for improved care to people with Challenging Behaviours after Traumatic Brain Injury in acute hospital settings” – Dr. Heather Block, Flinders University South Australia

Heather Block

“A multidisciplinary team approach to Behaviours of Concern; one form to rule them all” – Susan Lane, Tracey Carruthers, and Jessica Skene, Nepean Blue Mountains Local Health District New South Wales

Susan Lane

Tracey Carruthers

Jessica Skene

“The ‘Behaviour Resource Group’; an interdisciplinary model for Positive Behaviour Support in an inpatient brain injury rehabilitation unit” – Lauren Bannard, Joshua Butler, and Sophie Flint, South Australian Brain Injury Rehabilitation Service

Lauren Bannard

Joshua Butler

Sophie Flint

BRAIN INJURY IN THE MILITARY

The Royal Commission into Defence and Veteran Suicide is due to deliver its Final Report on 9th September 2024. Traumatic Brain Injury has been referred to as the “signature injury” of the wars in Iraq and Afghanistan. Over 300,000 United States Armed Forces veterans have sustained a brain injury just since 2003’s Operation Iraqi Freedom. According to the Centre for Military and Veterans’ Health, 1 in every 10 Australian Defence Force personnel who have served in the Middle East “reported the criteria for a new ‘mild’ Traumatic Brain Injury.” Sustaining one or more Traumatic Brain Injuries has been shown to more than quadruple the lifetime risk of a suicide attempt.

The Hidden Toll: Investigating Traumatic Brain Injury in Combat Veterans – Paul Scanlan, Vigil Australia and Lieutenant Colonel James Mitchell, The Royal Army Medical Corps, Consultant in Neurology and Rehabilitation, Defence Medical Rehabilitation Centre United Kingdom

Paul Scanlan

James Mitchell

TECHNOLOGY

“My technology space: tools and resources for planning the use of Assistive Technology for cognitive support following Acquired Brain Injury” – Associate Professor Libby Callaway, Monash University Victoria

Libby Callaway

“Feasibility testing of a motivational chatbot for brain injury rehabilitation” – Dr. Judith Hocking, Flinders University South Australia

Judith Hocking

“The local and global bionic innovation landscape aligned to brain injury: a deep dive into devices, treatments and implants” – Dr. Robyn Stokes, Bionics Gamechangers Australia

Robyn Stokes

Wednesday 25th September 2024

5:30	CONFERENCE CLOSE, DAY ONE
5:45	<p>DOCUMENTARY – “SHE ALWAYS FIGHTS IN THE END”; QUITA DOCKING’S STORY</p> <p>Like many people who sustain a severe brain injury, then 19 year-old jillaroo Quita Docking’s life was changed in an instant - when her horse, Brumby, tripped and fell on her crushing her skull. Countless hours of rehabilitation and multiple surgeries later, Quita’s come a long way since that 2002 day in Timber Creek, 300 kilometres west of Katherine in the Northern Territory. And she joins the Conference tonight along with an ABC TV documentary about her remarkable recovery.</p>
6:15	<p>FILM SCREENING – “THE RIDER”</p> <p>Winner of United States’ National Society of Film Critics Award for Best Picture in 2019, “The Rider” follows a cowboy’s struggle for purpose after a Traumatic Brain Injury ends his career on America’s competitive rodeo circuit. The film’s real-life star, Brady Jandreau, will join the Conference from South Dakota in the United States.</p>

Thursday 26th September 2024

9:30	<p>INTRODUCTION AND HOUSEKEEPING – Nick Rushworth (person with a brain injury), Executive Officer Brain Injury Australia, Conference Chair</p>
9:35	<p>OFFICIAL OPENING – Katrine Hildyard – South Australian Minister for Child Protection, Minister for Women and the Prevention of Domestic and Family Violence, Minister for Recreation, Sport and Racing</p>
9:45	<p>INTERNATIONAL KEYNOTE ADDRESS – Associate Professor Eve Valera, Harvard Medical School and Massachusetts General Hospital. <i>“Concussion-Plus in Women: Understanding the Intersection of Intimate Partner Violence and Brain Injury.”</i></p>

Empowering Ability
for people with
neurological
conditions.



Enhancing mobility
& physical function
through customised
exercise intervention.





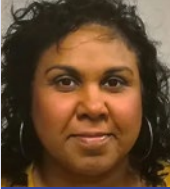


Creating inclusive workplaces
and helping candidates
re-enter the workforce with
meaningful employment.















VISIT US
AT OUR
BOOTH
or find out more at
www.scia.org.au

Thursday 26th September 2024

10:45	<div>CONCURRENT SESSIONS 5</div> <div><div><div><div><div>NATIONAL LAUNCH OF TOOLS FOR AGEING WELL WITH TRAUMATIC BRAIN INJURY</div><div>Dr. Christina Ekegren and Associate Professor Libby Callaway, Monash University Victoria, Professor Ian Cameron, University of Sydney and Professor Grahame Simpson, Ingham Institute for Applied Medical Research New South Wales</div><div>People living with Traumatic Brain Injury (TBI) have complex health needs, not only immediately following injury but throughout their lives. And these needs often become more complex in older age. Co-designed by stakeholder organisations in Victoria and New South Wales, older adults with lived experience of TBI and their family members as well as multidisciplinary clinicians who care for older adults with a TBI, "Tools for Ageing Well with Traumatic Brain Injury" is the first Australian resource of its kind, and will assist older adults to age well with their TBI.</div></div></div><div><div><div><div>Christina Ekegren</div></div><div><div>Libby Callaway</div></div><div><div>Ian Cameron</div></div><div><div>Grahame Simpson</div></div></div></div><div><div><div>DOMESTIC AND FAMILY VIOLENCE</div><div>Brain Injury Australia's 2018 report into Australia's first research into Domestic and Family Violence and Acquired Brain Injury found 2 in every 5 of the 16,000 victims of family violence attending Victorian hospitals over a decade had sustained a brain injury.</div><div>"It's been like a spiritual awakening for me": the impacts of Traumatic Brain Injury education workshops with women in prison" – Dr. Michelle Fitts, Western Sydney University New South Wales, Adjunct Associate Professor Jennifer Cullen, James Cook University Queensland, Glenda Duffy and Rachel Montgomery, Red Cross Queensland</div></div><div><div><div><div>Michelle Fitts</div></div><div><div>Jennifer Cullen</div></div><div><div>Glenda Duffy</div></div><div><div>Rachel Montgomery</div></div></div></div><div><div><div>THE DISCIPLINES – ORTHOPTICS</div><div>Canada's Evidence-based Review of moderate to severe Acquired Brain Injury (ERABI) found a "multidisciplinary inpatient rehabilitation seems to be more effective than a single discipline approach". The Conference draws attention to underacknowledged disciplines. For example, the majority of people who sustain a brain injury experience visual and ocular complications such as blurred vision, double vision, decreased peripheral vision, sensitivity to light and abnormalities in eye movement. Orthoptics is a discipline in eye healthcare specialising in the assessment, diagnosis and non-surgical management of eye disorders.</div><div>"Blurred lanes, black lines and moving trees. I thought I was dying" – Sue-Ellen Drew (person with a brain injury), South Australia</div></div><div><div><div><div>Sue-Ellen Drew</div></div></div><div><div><div>"Eye therapy in the setting of brain injury; simple and complex applications" – Tania Straga, Adelaide Eye Therapy, South Australia</div><div><div>Tania Straga</div></div><div><div>"Neuro-orthoptic rehabilitation in Acquired Brain Injury care" – Natalia Kelly, Vision Matters Victoria</div><div><div>Natalia Kelly</div></div></div></div></div></div></div></div></div></div>
11:30	<div>MORNING TEA</div>

Thursday 26th September 2024

NOON	<div>CONCURRENT SESSIONS 6</div> <div><div><div><div><div>DOMESTIC AND FAMILY VIOLENCE</div><div>A 2008 survey of 43,000 hospitalisations in four jurisdictions, including South Australia, found "Indigenous females experienced 69 times the rate of head injury due to assault experienced by non-Indigenous females".</div><div>"An acute care-to-community pathway for Aboriginal and Torres Strait Islander women with Traumatic Brain Injury from family violence: staff perspectives from a regional hospital" – Dr. Michelle Fitts and Yasmin Johnson, Western Sydney University</div></div></div><div><div><div><div>Michelle Fitts</div></div><div><div>Yasmin Johnson</div></div></div><div><div><div>CONCUSSION</div><div>Concussions – a "mild" Traumatic Brain Injury – have become an urgent public health concern; particularly for the injured who do not make a complete recovery within expected timeframes, and for the potential cumulative impacts of multiple concussions. Each year in Australia around 180,000 "mild" Traumatic Brain Injuries occur. For as many as 1 in every 5 of those injured, they will experience ongoing physical, cognitive and behavioural changes lasting months. Concussion can be difficult to diagnose. The management of symptoms that persist remains challenging.</div><div>"Cervical musculoskeletal dysfunction in relation to physiological and vestibulo-ocular dysfunction in patients with symptoms four weeks to six months following concussion" – Dr. Julia Treleaven, University of Queensland</div></div><div><div><div><div>Julia Treleaven</div></div></div><div><div><div>DOMESTIC AND FAMILY VIOLENCE</div><div>Brain Injury Australia's 2018 report into Australia's first research into Domestic and Family Violence and Acquired Brain Injury found 2 in every 5 of the 16,000 victims of family violence attending Victorian hospitals over a decade had sustained a brain injury.</div><div>"A translational approach to understanding the pathophysiology, biomarkers, and functional consequences of intimate partner violence-related brain injury" – Professor Sandy Shultz, Dr. Georgia Symons and Dr. Stuart McDonald, Monash University Victoria and Professor Michael O'Sullivan, The University of Queensland</div></div><div><div><div><div>Sandy Shultz</div></div><div><div>Georgia Symons</div></div><div><div>Dr. Stuart McDonald</div></div><div><div>Michael O'Sullivan</div></div></div></div><div><div><div>"Brain injury and family violence: establishing a tool to support clinical practice" – Kathryn Upton, Macquarie University and Dr. Vincent Oxenham, Royal North Shore Hospital New South Wales</div><div><div><div><div>Kathryn Upton</div></div><div><div>Dr. Vincent Oxenham</div></div></div><div><div><div>"Reframing the narrative; lessons of implementing a Traumatic Brain Injury project with Aboriginal and Torres Strait Islander women and services in regional and remote Australia" – Dr. Michelle Fitts and Yasmin Johnson, Western Sydney University New South Wales</div><div><div><div><div>Michelle Fitts</div></div><div><div>Yasmin Johnson</div></div></div><div><div><div>"Exploring the return to physical activity and exercise following a "mild" Traumatic Brain Injury" – Sally Vuu, Flinders University South Australia</div><div><div>Sally Vuu</div></div></div></div></div></div></div></div></div></div></div></div></div></div></div></div>
1:00	<div>LUNCH</div>

Traumatic Brain Injury Conference, NZ

in partnership with the
Laura Fergusson Brain Injury Trust

12 - 13 March 2025
Te Pae, Christchurch NZ

**Keeping It Real: Real Injury,
Real People, Real Lives**

Visit braininjuryconference.nz or
phone **0800 451 590** (NZ) / **1300 789 845** (AUS)

Organised by:

interpoint
EVENTS

Supported by:

 **Laura Fergusson
Brain Injury Trust**
Assessment. Rehabilitation. Support.

CONFERENCE PROGRAM

To find out more about each speaker, please visit <https://braininjuryconference.com.au/speakers/>

Thursday 26th September 2024

2:00

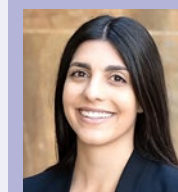
PLENARY – CONCUSSION/ “MILD” TRAUMATIC BRAIN INJURY

Facilitated by Professor Mark Bayley, Coriat Family Chair in Rehabilitation Innovations at The University of Toronto, Canada

Concussions – a “mild” Traumatic Brain Injury – have become an urgent public health concern; particularly for the injured who do not make a complete recovery within expected timeframes, and for the potential cumulative impacts of multiple concussions. Each year in Australia around 180,000 “mild” Traumatic Brain Injuries occur. For as many as 1 in every 5 of those injured, they will experience ongoing physical, cognitive and behavioural changes lasting months. Concussion can be difficult to diagnose. The management of symptoms that persist remains challenging.



Mark Bayley



Mia Formichella



Emily Moore

“Four years on; concussion’s long and winding road” – Mia Formichella (person with a brain injury), South Australia

“From Post-Concussion Syndrome to PhD; my journey” – Emily Moore (person with a brain injury), South Australia



The Hospital Research Foundation Group Stroke and Parkinson's offer a range of services to assist people to live well with neurological conditions.

Services include:

- Occupational Therapy
- Counselling and Psychology
- Specialised Nursing Support
- Exercise Physiology
- Peer Support Groups
- Social Activities



TOGETHER. FIGHT.

www.FightingParkinsons.org.au



Our **Brain X Body Fitness Studios** are innovative exercise facilities that focus on the elements of active aging – neuroplasticity, flexibility, strength, balance and social wellbeing. Programs are lead by our specialised Exercise Physiologist team.









www.BBFS.com.au

Unley
25 King William Road,
Unley 5061






Woodville
60 Woodville Road,
Woodville 5011

www.Stroke.org.au

Thursday 26th September 2024

3:00	<div>CONCURRENT SESSIONS 7</div> <div><div><div>CONCUSSION</div><div>Concussions – a “mild” Traumatic Brain Injury – have become an urgent public health concern; particularly for the injured who do not make a complete recovery within expected timeframes, and for the potential cumulative impacts of multiple concussions. Each year in Australia around 180,000 “mild” Traumatic Brain Injuries occur. For as many as 1 in every 5 of those injured, they will experience ongoing physical, cognitive and behavioural changes lasting months. Concussion can be difficult to diagnose. The management of symptoms that persist remains challenging.</div><div>“There is nothing ‘mild’ about mild Traumatic Brain Injury” – Dr. Les Koopowitz, University of Adelaide South Australia</div><div><div>Les Koopowitz</div></div><div>“Interdisciplinary rehabilitation of a person with persistent post-concussive symptoms; a reflective case study” – Tristan Clements, One Rehabilitation Service South Australia</div><div><div>Tristan Clements</div></div><div>“A seven-week interdisciplinary group intervention program for clients with persistent post-concussive symptoms” – Dr. Sarah Price, Barwon Health Victoria</div><div><div>Sarah Price</div></div></div><div><div>MULTIPLE “MILD” TRAUMATIC BRAIN INJURIES; HOW DO THEY ADD UP?</div><div>“What brains tell; the Australian Sports Brain Bank” – Associate Professor Michael Buckland, University of Sydney New South Wales</div><div><div>Michael Buckland</div></div><div>“Lasting impact: exploring the link between Traumatic Brain Injury and neurodegenerative disease risk”- Associate Professor Lyndsey Collins-Praino, University of Adelaide South Australia</div><div><div>Lyndsey Collins-Praino</div></div></div><div><div>THE FIRST PERSON – EMPLOYMENT</div><div>Around 2 in every 5 people who have sustained a Traumatic Brain Injury (TBI) find employment, 1 in 2 after a stroke. The last independent study of open employment services found that people with a brain injury had the second lowest representation in the workforce of all people with a disability and the third highest direct support needs (after people with autism and intellectual disability). And, while the total number of participants in Disability Employment Services has risen 7 per cent over the last 5 years, those with a brain injury have fallen 10 per cent. The Conference will share first person success stories while examining the key obstacles to, and some local innovations for finding, satisfying and sustainable employment for people with a brain injury.</div><div>“Yes, we can! Meaningful employment following Traumatic Brain Injury: the importance of collaboration between employer, line manager, healthcare providers, family members, and employee” – Dr. Alexander Smith (person with a brain injury), New South Wales</div><div><div>Alexander Smith</div></div><div>“Turning the sky around: shoring up the survivor’s return to employment in our ‘back to the future’ National Disability Insurance Scheme world” – Eva Sifis (person with a brain injury), Victoria</div><div><div>Eva Sifis</div></div><div>“Still learning how to realise the benefits of employment for people with brain injury: learnings from the perspective of a person with lived experience of brain injury and their employer” – Penny White, Lifetime Support Authority South Australia</div><div><div>Penny White</div></div></div></div> <div>4:00</div> <div>AFTERNOON TEA</div>
------	---

Thursday 26th September 2024

4:15	<div>CONCURRENT SESSIONS 8</div> <div><div><div>HOUSING</div><div>”You might need less support if you live in the right type of home”; evolving effective housing solutions to support people living with brain injury in the community” – panel discussion facilitated by Liz Forsyth, Brain Injury SA South Australia and Kylie Smith, Lifetime Support Authority South Australia</div><div><div>Liz Forsyth</div></div><div><div>Kylie Smith</div></div></div><div><div>EMPLOYMENT</div><div>Around 2 in every 5 people who have sustained a Traumatic Brain Injury (TBI) find employment, 1 in 2 after a stroke. The last independent study of open employment services found that people with a brain injury had the second lowest representation in the workforce of all people with a disability and the third highest direct support needs (after people with autism and intellectual disability). And, while the total number of participants in Disability Employment Services has risen 7 per cent over the last 5 years, those with a brain injury have fallen 10 per cent. The Conference will share first person success stories while examining the key obstacles to, and some local innovations for finding, satisfying and sustainable employment for people with a brain injury.</div><div>“Traumatic Brain Injury and Aphasia – A Lived Experience Based Therapeutic Approach to Rehabilitation and Recovery Integrating Cognitive Neuroscience” – Garry Whittaker (person with a brain injury), New South Wales</div><div><div>Garry Whittaker</div></div><div>“Unique strategies that case co-ordinators implement to assist clients with an Acquired Brain Injury to return to work with their pre-injury employer” – Miffy Durham, State Head Injury Unit Western Australia</div><div><div>Miffy Durham</div></div><div>“Efficacy of early vocational intervention following traumatic injury: a Randomised Controlled Trial” – Professor Jennie Ponsford, Monash University Victoria</div><div><div>Jennie Ponsford</div></div></div></div> <div>5:15</div> <div>CONFERENCE CLOSE</div>
------	--



The Hospital Research
Foundation Group

Stroke

The Hospital Research Foundation Group

The Hospital Research Foundation Group (THRFG) – Stroke and Parkinson’s purpose is to maximise choice, independence, mental health, and wellbeing for people impacted by neurological conditions. We achieve this through a range of services, education, advocacy and research. Our allied health team includes specialised nursing, occupational therapy, counselling, and psychology. We also have a team of specialised exercise physiologists who provide individualised exercise programs at our innovative Brain X Body Fitness Studios, located at Unley and Woodville. THRFG – Stroke and Parkinson’s host several peer support and activity groups. Stroke survivors, people living with Parkinson’s/other neurological conditions and carers meet regularly at these groups for friendship, lunch, or for activities such as painting, singing, photography or games.

www.stroke.org.au



Brazier
Mobility

Creating Independence

Brazier Mobility

Brazier Mobility (formerly Les Brazier Special Vehicles) is Australia’s premier modifier of Vehicles for Wheelchair Accessibility and modified driving controls. All modified Vehicles are certified to the relevant Australian Standard and Australian Design Rules irrespective of which state. With over 35 years’ experience the team are experts in the transportation needs of the mobility challenged and elderly ranging from one off individualised modification to multiple vehicle modifications. The Wheelchair Accessible Vehicles along with other modifications and mobility products are distributed to an Australia wide customer base.

www.braziermobility.com.au



Pop-Up Health
Your kind of care

Pop Up Health

Pop-Up Health is a proudly South Australian owned and operated business, providing tailored healthcare services across the state to meet our client’s needs. Our skilled team deliver holistic, client-focused care with respect and dignity. We provide individual consultation with all clients to develop plans that aim to achieve the best client outcomes and goals. Community wellbeing is our focus and is important to us. We are proud innovative leaders in the delivery of care, and we are passionate about our quality of service.

www.popuphealth.com.au



ALL ABOUT
caring
Dischargeability

All About Caring

All About Caring is your trusted partner in the provision of high intensity supports for Participants with highly complex and/or multiple disabilities. All supports are individually planned to meet the Participants specific needs, goals and preferences, in a compassionate and fully customised consumer-directed manner. We are a values-driven company committed to the principles of being reliable, sustainable, adaptive, customer-focused and collaborative. It is these values that are embedded in everyday operations and have built a strong foundation for long-term relationships with employees, Participants, Government, funders and partners.

www.allaboutcaring.com.au



Abbott

Abbott

From removing the regular pain of fingersticks as people manage their diabetes, to connecting patients to doctors with real-time information monitoring their hearts, from easing chronic pain and movement disorders to screening? 100% of Australia’s blood donations to ensure a healthy supply Our purpose is to make the world a better place by bringing life-changing health technologies to the people who need them. That’s our commitment to helping you live life to the fullest.

www.aus.abbott



Lifetime
SUPPORT

Government of
South Australia

The Lifetime Support Authority

Through the Lifetime Support Scheme (LSS), the Lifetime Support Authority (LSA) plans and funds necessary and reasonable treatment, care and support for people who sustain serious injuries in a motor vehicle accident on South Australian roads, regardless of fault. This year marks 10 years since the LSA commenced operation. Serious injuries including brain and spinal cord injuries, amputations, burns and blindness can require a lifetime of support to help people engage in rehabilitation and maximise their independence in the community. 70% of LSS participants have traumatic brain injuries due to a motor vehicle accident.

www.lifetimesupport.sa.gov.au



CXDX
CONNECTED DIAGNOSTICS

CXDX

CXDX Connected Diagnostics is a leading distributor of cutting-edge brain health technologies in Australia. We proudly offer the NeuroCatch ® Platform (ARTG #439393), an advanced EEG technology that utilizes event-related potentials for objective cognitive assessments that aids in diagnosis. Our portfolio also includes the Neurotracker ® brain training software, designed to enhance cognitive functions through dynamic, personalized training, and the C-Rod, an innovative oculomotor skills training tool that optimizes visual tracking and coordination. At CXDX, we are committed to delivering the latest in neurotechnology to support clinicians, researchers, and individuals in understanding their brain vitals and helping them achieve peak cognitive performance and brain health.

www.cxdx.au



ONCALL
GROUP AUSTRALIA



sacare

SA Care

SACARE is a South Australian, family-founded organisation committed to providing the best support and accommodation services for people living with disabilities. With a strong focus on person-centred care, SACARE offers a wide range of services including supported

accommodation, in-home services, respite, and innovative programs designed to enhance the quality of life for its clients. The team is dedicated to fostering independence and empowering individuals through tailored support solutions. SACARE also promotes inclusivity, innovation, and community engagement, continuously striving to improve the lives of those they serve while maintaining a positive and supportive workplace culture.

www.sacare.com.au



DRAKE
medox

Drake Medox

If you or someone in your family needs support and care at home, Drake Medox can help. For over 50 years, Drake Medox has been supporting individuals to live safely and independently in their home, with the support of our qualified nursing and disability support teams. We are specialists in complex 24/7 care support in the following areas: Spinal Cord Injury, Acquired Brain Injury, Traumatic Brain Injury, Cerebral Palsy, Complex Physical Support, Autism Spectrum Disorder, Complex Behaviours, Stroke, Dual Diagnosis, Ventilation & Tracheostomy.

www.drakemedox.com.au



Connectivity

Connectivity

Connectivity Traumatic Brain Injury Australia is fulfilling the unmet need of educating and raising awareness of traumatic brain injury (TBI) in the Australian community and enabling the implementation of TBI research to improve outcomes for people with TBI. Connectivity links together people with lived experience, carers, researchers, clinicians and healthcare providers to build the evidence base and improve the lives of people following TBI of all severities. Established in 2020, Connectivity is the nation’s leader in providing, educating, and disseminating consistent, trusted, and reliable information on best-practice, evidenced-based information about TBI.

www.connectivity.org.au



Spinal Cord Injuries Australia

Spinal Cord Injuries Australia - SCIA

Spinal Cord Injuries Australia (SCIA) is a not-for-profit organization dedicated to empowering individuals with spinal cord and neurological conditions. Established in 1967, SCIA provides a wide range of services including advocacy, peer support, NDIS planning, community access, employment assistance and specialised exercise programs. Their mission is to create a world where people with spinal cord injuries & neurological conditions can confidently thrive independently. SCIA also focuses on raising awareness and influencing public policy to improve the quality of life for those affected.

scia.org.au



Add-Life Technologies

Add-Life Technologies

The most effective way to do life-changing virtual reality exercise and mobility assessment. Add-Life solves the problem of access and adherence to daily exercise and rehabilitation with automated mobility and user reporting.

www.add-life.info/learn



**Brain Injury Association of Tasmania
(National Assistance Card)**

The National Assistance Card is a personalised card to assist people with disability in the community. Cardholders can use the Card to communicate their unique challenges and the assistance they may need. Every Card includes a personalised QR Code that provides access to written or video information the cardholder has chosen to share – in their own words. The Card is available to all people in Australia living with brain injury and will soon be available nationally for autistic people, following a successful trial in Tasmania. The National Assistance Card Project is funded by the Australian Government Department of Social Services.

www.biat.org.au

www.nationalassistancecard.com.au



MePacs

MePACS - Registered NDIS provider of personal alarms. MePACS Emergency Response Centre is a 24/7, 365 days a year service. Every emergency call is promptly handled by trained responders who triage and provide assistance with compassion and care, so you can enjoy peace of mind, knowing that MePACS is always there when you need it most. MePACS has over 50,000 members nationally with over 30 years' experience in Australian healthcare. At MePACS, we genuinely value a person centred approach and human connection. Our duty of care extends beyond the technology we provide – it encompasses empathy, professionalism, and commitment to safety that is at the heart of our service.

www.mepacs.com.au



National Relay Service (Concentrix)

National Relay Service (NRS) is a phone solution for people who are d/Deaf, hard of hearing, or have a speech/communication difficulty. The NRS is free and confidential. The NRS provide a range of different types of call services, depending on your needs and preferences. The NRS facilitate phone communication across individuals, businesses and communities via a Relay Officer or Interpreter. The NRS is available 24/7 (excluding Video Relay). Video Relay calls are available Monday to Friday 7am to 6pm (AEST) and Saturday 8am to 12pm (AEST) excluding national public holidays.

Phone Number: 1800 555 660

Email: helpdesk@relayservice.com.au

www.accesshub.gov.au



I can jump puddles

At I Can Jump Puddles, we empower people living with disabilities in Adelaide and regional SA to achieve their goals. We offer a comprehensive range of NDIS support services, including essential therapeutic interventions.

Our dedicated team of allied health professionals will guide you through the NDIS maze, connect you with the perfect service providers, and help you maximize your plan to live a fulfilling and independent life. Let's jump those puddles together!

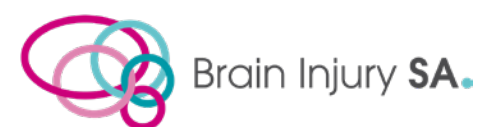
www.icanjump puddles.com.au



One Rehabilitation Services

ONE Rehabilitation Service is a leading Brain Injury Rehabilitation clinic in Adelaide, South Australia, dedicated to helping individuals recover and thrive after brain injury, concussion, stroke, or neurological conditions. Our interdisciplinary team of allied health professionals, including occupational therapists, speech therapists, physiotherapists, exercise physiologists, social workers, and psychologists, work collaboratively to deliver personalised, evidence-based care. We are committed to empowering our clients through a holistic approach, both in our state-of-the-art Ashford clinic and within the community. Our mission is to support individuals on their journey to regain independence, improve quality of life, and achieve meaningful outcomes.

www.onerehabilitationsservice.com.au



Brain Injury SA

Brain Injury SA is a not-for-profit organisation with over 30 years' experience specialisation in supporting adults with an acquired brain injury. Providing a broad range of therapy, advocacy and support services, we work as an interdisciplinary team to assist people to pursue their goals following brain injury. Operating from three convenient locations across Adelaide, services can be in clinic, in home, or in the community. We also have regional outreach capacity, using a combination of telehealth and visiting services to enable specialist service access when local capacity is not available. Contact us on 8217 7600 or info@braininjurysa.org.au to find out how we can support you to embrace life after brain injury.

www.braininjurysa.org.au

THE VOICE OF BRAIN INJURY



brain injury AUSTRALIA
braininjuryaustralia.org.au

Suite 5, Hodson Building
Royal Rehab
241 Morrison Rd, Putney NSW 2112

Phone: +61 2 9808 9390

Freecall: 1800 BRAIN1 (1800 272 461)

Email: admin@braininjuryaustralia.org.au

www.braininjuryaustralia.org.au