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AN OVERVIEW OF BEHAVIORAL TREATMENT IN LIGHT OF COGNITIVE IMPAIRMENT

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THANK YOU
TRADITIONAL TREATMENT

COUNSELING
SKILL BUILDING
CONTINGENCIES
(MEDICATIONS)

THERAPY IS SUPPOSED TO WORK BY....

TECHNIQUE
PROVIDE INFORMATION

THEORY
INFORMATION CHANGES WAYS OF THINKING
CHANGE IN THINKING CAUSES CHANGE IN BEHAVIOR

HOWEVER... BECAUSE OF COGNITIVE ISSUES...

PERSONS WITH COGNITIVE IMPAIRMENT:
MAY STRUGGLE TO EXPRESS THINKING
THINKING MAY NOT CHANGE DUE TO COGNITIVE DEFICITS
CHANGE IN THINKING MAY NOT CHANGE BEHAVIOR
SKILL BUILDING TREATMENT

TEACH ALTERNATIVE BEHAVIORS

MORE EFFECTIVE BEHAVIOR WILL REPLACE OLD INEFFECTIVE BEHAVIOR

HOWEVER... BECAUSE OF COGNITIVE ISSUES...

CANNOT LEARN NEW SKILL

PERSEVERATE ON OLD BEHAVIOR

FORGET TO DO NEW SKILL

DISTORT NEW SKILL

THEORY BEHIND CONTINGENCIES

MANIPULATE CONSEQUENCES

BEHAVIOR CHANGES IN RESPONSE TO CONSEQUENCES
ISSUES
FORGET BEHAVIOR
FORGET CONSEQUENCES
REBEL AGAINST
CONSEQUENCES
CONSEQUENCES TOO WEAK
DO NOT ACT IN OWN BEST
INTEREST

DIFFICULTIES AS APPLIED TO
COGNITIVE IMPAIRMENT

NEUROPSYCHOSOCIAL
INTERVENTION
AN ENVIRONMENTAL
TREATMENT MODEL

DO NOT TRY TO CHANGE PERSON TO FIT WORLD
CHANGE ENVIRONMENT (OTHER PEOPLE AND PHYSICAL WORLD) TO FIT THE PERSON
Some believe that 95% of maladaptive behaviors in treatment after brain injury can be accounted for by staff behavior !!!!
NEUROPSYCHOSOCIAL ENVIRONMENT

STAFF ARE THE TREATMENT MUST RUN THE SCRIPT ACCURATELY ADAPT TO THE NEEDS OF THE PERSON

Care Plans

FOCUS ON STAFF NOT “PERSON WILL…”

OCCUPATIONAL THERAPY: MOTOR STRIP ARMS
PHYSICAL THERAPY: MOTOR STRIP LEGS
SPEECH PATHOLOGY: BROCA / WERNICKE
PSYCHOLOGY: FRONTAL/LLIBR/TEMPORAL
NURSE/PHYSICIAN: BRAIN STEM
RECREATIONAL THERAPY: PARASIAL
SOCIAL WORK: BRAIN OF THE FAMILY
CASE MANAGER: BRAIN OF INSURER
TRANSDISCIPLINARY TEAM

KAROL

PROBLEM 1

PROBLEM 2

PROBLEM 3

EVERYONE COMES TO ROUNDS

SHOULD NOT DO SOMETHING

SHOULD NOT ACT THAT WAY

SHOULD NOT GET AWAY WITH SOMETHING

STAFF EXPECTATIONS


Karol, R.L. Team models in neurorehabilitation: structure, function, and culture change Neurorehabilitation 34 (2014) 655–669

THE END