



Headway Brain Injury Association BOP Inc

53 Fraser St
Tauranga 3112
Ph 07 572 4547 | 027 9261881
liaison.headwaybop@brain-injury.org.nz
www.braininjurybop.org.nz

OUR BRAIN

the Crown Jewel of the Human Body



Why the Jewel?

- The brain is the body's control centre and the organ that makes us uniquely who we are. It receives information from the world around us, interprets it and directs how we think, feel, remember, communicate, make decisions and interact with others.
- Our brain controls our movement, senses, emotions, behaviour, personality, memory, attention and ability to learn. It helps us to understand our experiences, form relationships, solve problems and plan for the future. Every experience we have shapes our brain, and in turn, the brain shapes how we experience the world. Together with our life experiences, culture, relationships, and environment, the brain plays a central role in making us who we are.

Brain Injury... when things go wrong

- Statistically, there are about 110 traumatic brain injuries sustained every day in New Zealand. That's 40,000 every year.
- Most of these injuries are classified as mild traumatic brain injuries - concussions. Most are caused by falls, others by assaults, traffic accidents, or on the sports field.
- At risk groups in New Zealand are the very young, the elderly, young men in their late teens and early 20's, and women who suffer domestic assaults.
- While some present at hospitals, many more don't seek medical attention and are often bewildered by symptoms.

About Headway BOP

- Headway Brain Injury Association BOP Inc is a charitable organisation set up to support brain injured people, their whanau, carers, and the wider community. We have been based in Tauranga since 1995.
- Our geographical area covers Tauranga, Mount Maunganui, Papamoa, Te Puke, Pukehina, Waihi Beach, Katikati, and the lower Kaimai Ranges.
- Headway is affiliated with Brain Injury New-Zealand.
- Brain Injury NZ was seen campaigning against the "Run it Straight" craze last year.
- We have office space in Fraser Street, and are staffed by one Liaison Officer, 1 part-time Administrator and 1 Funding Genius.

Our Clients and Members

- We have a current membership of 78, made up of those currently seeking guidance and treatment, and those who are long-term members.
- On any given month, we receive up to 38 referrals – requests for assistance from both current members and new clients.
- Those accessing help have a range of injuries, from, traumatic brain injury (often concussion), to hypoxic brain injury, aneurysm, Korsakoffs Syndrome and damage due to chemical poisoning.

Headway BOP – Practical Help

- One to one assistance – We assist people accessing ACC, MSD, doctors visits, workplace meetings, housing applications etc. We often receive the authority to act on behalf of clients with ACC and MSD.
- We run a fortnightly peer support group in Tauranga and a monthly group in Katikati.
- We produce a monthly newsletter with relevant information and support.
- We liaise with other groups, social workers, HIP's and Health Coaches to ensure we are all doing all we can to facilitate recovery, medical and community access.

Headway – Education

- Once a person leaves hospital, there is often no follow-up. This is particularly true in cases of concussion.
- People are ill equipped to navigate the system alone.
- There is little knowledge in our communities about the role of concussion services and that help is out there.
- Symptoms are frightening if people are unprepared.
- Management and education are crucial.

Education ...

The recovery jungle

What other factors impact recovery?

- Stress
 - History of migraine
 - Being female
 - Mental health challenges prior to injury
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- Don't try to "push through" and ignore symptoms
 - Fatigue, headaches, brain fog, lack of balance, irritability to name a few of the common symptoms, will raise their unwanted heads and end in the person crashing.
 - We talk to people about introducing daily planners to think about rest periods, about not doing too much on one day.
 - Do what your mother would tell you to do – eat well, exercise, rest, plan, routine.

What Education/Information is available?

- Community talks and presentations
- Go to our website: [Headway Brain Injury BOP](#)
- [Monthly Newsletter](#)
- NZ Neurological Foundation has a great [lecture library](#).
- [Diary of a Head Injury](#)" by Nick Worthington, award winning doco.

ACC and Medical Practitioners Role

For those recovering from a TBI and who accessed medical help, ACC becomes an important partner to them in the journey to recovery. What is recorded in discharge notes becomes very important in terms of the help a person will be judged to need.

ACC need to understand the Mechanisms of an Injury.

- This refers to the cause and the way the injury happened.
- It describes the event or movement that led to the injury:
- "Patient hit head on concrete after tripping".

The Mechanism should explain:

1. What happened
2. How the body moved or was affected
3. What body part was injured
4. When and where it occurred.

Case Study 1.

- Snowboarder fell during a jump, face planting heavily on the ice.
- Air lifted to hospital and treated for multiple fractures of the skull and facial bones.
- Concussion not listed as one of his diagnosis in his discharge notes.
- Review asked for to include concussion symptoms.
- ACC - "ACC finds it unlikely that this accident caused a concussion, and if it had, it is also unlikely that it was the cause of the clients symptoms and claimed incapacity".

Case Study 2.

When Concussion Is Not Picked Up

- A young man presented at his local A&E department with a sore foot. While he was waiting to be seen, he was assaulted by another member of the public in the waiting area. During the assault, the young man was hit in his head by the other man's crutch. Police were called and the perpetrator was escorted out.
- When the young man was seen by the doctor at A&E, his foot was treated, but no mention was made of the possibility that he may have sustained a mild TBI (concussion).
- Weeks later, the young man was at his local library where he saw a poster put out by Headway, that listed the symptoms of concussion. He phoned and told me he was experiencing all of the listed symptoms – brain fog, fatigue, vision disturbance, balance issues and irritability. He had been unable to work for the past few weeks. He was afraid of what may be wrong with him and was very isolated.
- He was advised see his GP, discuss what had happened and ask for a referral to concussion services. He did this and began his assisted recovery.

Take-Aways

- Brain injury is an invisible injury. Without professional support and guidance, people feel very lost, isolated and misunderstood.
- Brain injury shows up in different ways with each person. Some recover quickly while others struggle for years.
- If a concussion is suspected, always document in notes with details of the mechanisms of the injury.
- Let people know that Headway is available to help.
- Recovery is quicker when the patient has support in the community.