

Day 1: Thursd	ay December 5, 2024 Beanfield Centre, Exhibition Place
07:30 – 08:30 Foyer	In Person Registration & Breakfast
<mark>08:30 – 09:00</mark> Ballroom D Ground floor	<mark>Opening Remarks</mark> Thomson Rogers – Diamond Sponsor
Keynote Address	Dr. Therese O'Neil-Pirozzi
09:00 – 10:00 Ballroom D	 Cognitive-Communication Rehabilitation: Best Practices Dr. Therese M. O'Neil-Pirozzi, ScD, CCC-SLP; ASHA Fellow Associate Professor, Department of Communication Sciences & Disorders; Director, Cognitive-Community Integration Lab; Northeastern University Bouvé College of Health Sciences Post-acquired brain injury (ABI), individuals participate in rehabilitation to improve their cognitive-communication functioning and maximize life participation, productivity, and quality of life. This keynote presentation will focus on evidence-supported cognitive-communication therapeutic approaches and practical strategies, with an emphasis on attention, memory, executive function, and social communication domains. Learning Objectives To identify recommended therapeutic approaches and strategies to treat attention, memory, executive function, and social communication deficits post-ABI To distinguish among recommended approaches and strategies to treat attention, memory, executive function, and social communication deficits based on severity of cognitive- communication deficits To describe how use of attention, memory, executive function, and social communication deficits post-ABI
10:00 – 10:30 Pre-Function C & D	Morning Break and Sponsor Exhibit Viewing
10:35 – 10:45	Transition to Concurrent Sessions



Concurrent #1

The following thre	e sessions will run concurrently from 10: 45 — 11:30. Select one session to attend
10:45 – 11:30 C #1, Session A Ballroom D Ground floor	Impact - an Accidental Meditation. A Short Film Screening and Discussion on the Significance of Incorporating art and Mindfulness into the Brain Injury Recovery Process Jewels Krauss, Actor, Writer, Director and Editor Jewels Krauss will share therapeutic techniques and mindfulness practices learned through her journey of self-discovery after sustaining a severe concussion due to a bicycle accident. Participants will watch a 15-minute short film, <i>Impact - An Accidental Meditation.</i> The film offers a sensory exploration of the protagonist's post-concussion world, delving into the heightened physical and emotional experiences of life after impact. It aims to shed light on how trauma is stored, processed, and released within the body, as well as the triggers and resilience inherent within our physical being. The presentation will also explore how art and mindfulness can facilitate the healing process.
	 Learning Objectives Gain greater awareness of an often overlooked injury Discuss the complex process of concussion recovery and trauma following an accident Understand the significance of incorporating art into the healing process
10:45 – 11:30 C#1 , Session B Room 200A 2 nd floor	Beyond the ABI: Sara Baker's Fight for Justice Sara Baker, Plaintiff – Baker vs. Blue Cross Stephen Birman, Partner, Thomson Rogers Robert Ben, Partner, Thomson Rogers Lucy Jackson, Partner, Thomson Rogers
	Sara Baker, a dedicated mom, wife, and Director at Humber River Hospital, suffered a life- altering brain bleed in 2013, which forced her to stop working. Initially, Blue Cross approved her long-term disability benefits, but later reversed their decision, despite overwhelming medical evidence supporting her disability. She was unfairly subjected to improper conduct, which included 375 hours of surveillance.
	Thomson Rogers' Partners Stephen Birman, Robert Ben, and Lucy Jackson were instrumental in the Baker vs. Blue Cross case. After a five-week trial, the jury awarded Sara past benefits, mental distress damages, and an unprecedented \$1.5 million in punitive damages. The Ontario Court of Appeal upheld this award, emphasizing the need for good faith and fair treatment by insurance companies.
	Sara's case led to the largest penalty ever against a Canadian insurance company for an individual claim, a win made possible by her persistence and stamina. For the first time, she will publicly share her experience and the impact of this landmark verdict.



11.20 11.40	 Learning Objectives Understand the personal, professional, and legal challenges Sara Baker faced, including the role of surveillance in disability claims The importance of a client-centered approach and skilled legal representation Learn how the court's decision emphasizes good faith in the insurance industry
11:30 - 11:40	Transition Time
Concurrent #2 The following thre	e sessions will run concurrently from 11: 40 – 12:25. Select one session to attend.
11:40 – 12:25 C#2, Session A	Traumatic Brain Injury (TBI) and the Minimally Conscious – The Impact and Benefits of a Multidisciplinary Sensory Stimulation Program
Room 200C	Deborah Tang , PhD, Clinical Director, Clinical Psychologist with specializations in
2 nd floor	Neuropsychology and Rehabilitation, Bayshore Integrated Care Solutions NRIO
	Melanie Hay , MSc (OT), OT Reg (Ont) Occupational Therapist, Bayshore Integrated Care Solutions NRIO
	When we think of persons with severe traumatic brain injury (TBI) in a coma, or minimally conscious state, many assume patients are non-responsive and rehabilitative treatments are not necessary or beneficial.
	Hospitals have limited resources to provide rehabilitative care and often minimally conscious individuals do not meet the criteria to access rehabilitative services. Emerging research, however, shows that sensory stimulation programs can contribute to the development of neuroplasticity following TBI. Understanding and developing treatments for the person in an altered state of consciousness can facilitate recovery to higher levels of consciousness, and improve physical and communicative functioning, which can lead to an overall improved quality of life. The multidisciplinary approach used at Bayshore Integrated Care Solutions NRIO will be explored and data will be presented that will show client progress in areas of physical, cognitive and communicative functioning. A case study will highlight the journey with the client and family and the challenges, strategies and successes.
	Learning Objectives
	 Understand what constitutes a minimally conscious state in traumatic brain injury, and the rehabilitative options available to individuals in these states Explore a potential model for a multidisciplinary, sensory stimulation program, from assessment to intervention along with data demonstrating improved responsiveness, cognitive, communicative functioning and physical improvements following implementation of the program Gain a toolbox of research, best practice and outcome based, multi-disciplinary interventions for the minimally conscious client



11:40 – 12:25 C#2, Session B Ballroom D Ground floor	 Approach to Symptom Management Shannon McGuire, BHSc (PT), Outpatient Acquired Brain Injury Program; Post-Acute COVID Rehab Program, St. Joseph's Health Care – Parkwood Institute This presentation will discuss the development and implementation of the Rainbow Pacing Program and will highlight the role that survivors had in the development. It will outline how to use the Rainbow Pacing Program tools in clinical practice. Learning Objectives Learn how to educate their patients about the different zones of the Rainbow Pacing Program and the importance of spending time in the Target Activity Zone to allow for recovery over time Identify specific, targeted and consistent language to use with patients to describe their symptom levels, difficulty of tasks and help with goal setting and education about pacing Understand the importance of language and terminology, pacing activities and how tracking activity and graphing symptoms helps reinforce pacing, reduced symptoms
	 and increased function. Appreciate the value and creativity that individuals with lived experience have to offer and the importance of soliciting feedback, either formally or informally, from survivors early and often when developing tools and resources
11:40 – 12:25 C#2, Session C Room 200A 2 nd floor	Managing Legal and Regulatory Issues for Healthcare Providers in the Brain Injury Field Lonny Rosen C.S, Partner, Rosen Sunshine LLP Sari Feferman, Partner, Rosen Sunshine LLP
	This presentation will review some of the most common legal and regulatory issues faced by health care providers supporting clients with acquired brain injuries, and how to manage these issues in a way that has the highest likelihood of resolving the issue while protecting the professional's reputation, relationships and business.
	Learning Objectives
	 Acquire tips on preparing reports and giving evidence in legal proceedings – not just for how best to help their clients (which the client's personal injury lawyer will address) but in a manner that will be most protective of and least stressful for the health professional, from a lawyer with expertise in regulatory and health law Get tips on surviving insurance audits and dealing with billing issues that arise, from a lawyer with experience representing professionals in such disputes and in the regulatory proceedings that may arise from insurers' billing concerns Review some of the most frequent issues faced by professionals working in this area, and the complaints, investigations and other proceedings that can result from privacy breaches, inadequate security, recordkeeping shortcomings and other challenges



	 Learn about the regulatory process and how to respond to complaints and investigations without making the situation worse
12:25 – 13:25 Pre-Function C & D	Lunch, Sponsor Exhibit Viewing & Networking
Rapid Podium Pres Ballroom D	sentations, 5 presentations, 9 minutes each, followed by a group Q&A
13:25 - 13:34	Supporting Individuals with ABI or Intellectual and Developmental Disabilities (IDD)
Rapid Podium #1	Through the Justice System
'	Melissa McMillan, BA (Hons), Developmental Justice Case Manager at the Downtown East Justice Centre, Surrey Place
	This presentation will outline the difficulties people with Developmental Disabilities and Acquired Brain Injuries face during their time with the Criminal Justice System, as well as what works to support these individuals through the Criminal Justice System.
13:34 – 13:43 Rapid Podium #2	Toronto (Maybe GTA? What about Ontario?) Concussion Navigator v2.0: The evolution and Next Steps of a Concussion Navigation Tool Seeking to Expand Care Pathways Beyond Toronto
	Evan Foster , MHSc, Hull-Ellis Concussion and Research Clinic, Toronto Rehabilitation Institute – University Health Network
	The Toronto Concussion Navigator (TCN) was launched in February 2024 as a user-friendly tool for patients, their caregivers, and health practitioners to use to help them find and access publicly funded, specialized concussion care in Toronto. This presentation will touch on challenges in expanding the TCN to the Greater Toronto Area and eventually the entire province of Ontario. We will discuss: (1) various evaluation strategies to work towards equitable access to concussion care services across Ontario, especially for underserved populations will be discussed, (2) the importance of maintaining consistent quality of care across both public and private clinics, (3) the values of collecting additional personal information within the tool, (4) potential funding models to support the sustainability of the Concussion Navigator, (5) steps, timelines, and responsibilities to ensure the successful implementation of the expanded tool.
13:43 – 13:52 Rapid Podium #3	Relationship Between Cause of Concussion and Long-Term Recovery in a Longitudinal Cohort of 600 Patients Chloé Buso, BScH, Institute of Medical Science, Neuroscience Specialization, University of Toronto; Canadian Concussion Center, Toronto Western Hospital – University Health Network
	The primary objective of this study was to improve the precision with which patients are treated for this condition by determining the risk factors. Our study of 600 patients with concussion plus persisting concussion symptoms (C+PCS) aimed to examine the association between the four leading causes of concussion (S&R, MVC, Fall, and SBOV) and the likelihood of recovery from concussion including the speed and completeness of long-term recovery. We examined the association between the following: (1) the cause of C+PCS and the time required to achieve



	complete recovery and (2) the cause of C+PCS and the duration of persisting symptoms in those with known incomplete recovery.
13:52 – 14:01 Rapid Podium #4	How to Evaluate Brain Injury Care Quality and Equity? Connecting the Silos in a Disconnected Healthcare System Arman Ali, MPH, BSc, KITE Research Institute, Toronto Rehabilitation Institute – University Health Network
	The processes of Quality Indicator development and prioritization within the context of the Care Pathways will be reviewed, with emphasis on the data system gaps, implementation barriers that were identified by key partners, and how to move forward with system evaluation in light of these gaps. Implementation frameworks to address gaps, adaptation to third-party funded databases, and next steps in advancing system evaluation capacity will be discussed.
14:01 – 14:10 Rapid Podium #5	Process Map for Navigating Challenges Faced by Clinicians and Individuals Seeking Housing – Solutions, Success Stories, and Next Steps
	Meeta Gugnani , MSc (OT), Owner/ Director, Mind Connections Inc.; Adjunct Lecturer at University of Toronto, Department of occupational Science and Occupational Therapy
	Alison Foo, MSc, PMP, Clinical Research Professor at Seneca College Laura Pazzano, Master of Health Policy, University of Sydney; Faculty of Medicine & Health Bachelor of Arts (Honours Specialization in Sociology of Health and Ageing, Minor in Thanatology), Western University Colleen Worsley, MSW RSW - Clinical Supervisor, Services provided in Toronto & GTA, Peterborough & Kawartha East, Barrie
	The process map will serve as a practical tool for clinicians and brain injury survivors throughout Toronto, aiding them in their search for sustainable housing. Structural issues, such as the lack of affordable housing, adverse economic conditions, and shortage of brain injury-trained staff, compound the challenges faced by those living with brain injury who are homeless or marginally housed. Therefore, further assistance from public and private organizations is needed to address the root causes and diminish the impact of homelessness on this vulnerable population.
14:10 - 14:20	Group Question & Answer Period
14:20 - 14:30	Transition Time
C	

Concurrent #3 The following thre	e sessions will run concurrently from 14: 30 – 15:15. Select one session to attend.
	Are You Providing Optimal Care for Persons post-TBI? Discover how Living Clinical Practice
57	Guidelines are an Accessible way to Elevate your Clinical Practice.
Room 200A 2 nd floor	Parwana Akbari , HBA, KITE Research Institute, Toronto Rehabilitation Institute - University Health Network
	Judith Gargaro , MEd, KITE Research Institute, Toronto Rehabilitation Institute - University Health Network



Through an ongoing comprehensive review of research and clinical evidence, the Canadian Clinical Practice Guideline (CPG) for the Rehabilitation of Adults with Moderate-Severe Traumatic Brain Injury (TBI) provides healthcare professionals with best-practice recommendations, resources, and tools to make clinical decisions that will improve the quality and consistency of TBI care. The CPG's benefits, however, are contingent on successful knowledge translation (KT) and the implementation of the CPG into professional practice. This presentation will show clinicians how to use and integrate online Canadian Clinical Practice Guidelines (CPG) and associated Care Pathways using the principles of adult learning.

Learning Objectives

While healthcare professionals welcome evidence-based practical support to help them make informed and up-to-date TBI clinical care decisions, awareness of the value and ease of using such supports and resources is limited. The session will review key clinical actions, strategies, and resources used to bring the evidence into practice

14:30 – 15:15 C#3, **Session B** Room 200C 2nd floor

From Both Sides Now: Lessons from Life as a Family Care Partner

J. Bronwen Moore, BScOT, MA, OT Reg (Ont) Toronto Rehabilitation Institute – University Health Network, Adjunct lecturer with University of Toronto

After working for 20 years as an occupational therapist in outpatient Neuro Rehab, life took an unexpected turn when Bronwen found herself helping a close family member navigate the difficult months that followed a significant traumatic brain injury. This health journey offered a new perspective on the world of brain injury survivors and their family care partners. This presentation will offer insights drawn from this experience, together with practical strategies for those working with brain injury survivors and their families.

Learning Objectives

- Participants learn through personal examples as well as research-based evidence
- Explore practical strategies around the following ideas: health literacy, working with delirium, recognizing and supporting pain, trauma informed practice, communication, meaningful occupation, self-efficacy, infection control, personal emergency preparedness and gratitude practices.

14:30 – 15:15 C#₃, Session C Ballroom D Ground floor Trauma Informed Care: What It Means and How It Is Delivered

Eden Dales, BA, MSW, RSW, Practice Director, Eden Dales Social Work

This presentation will review Trauma Informed Care, specifically for working with those with Acquired Brain Injuries and their support network. This training, geared to health care providers and allied health practitioners, will provide a comprehensive review of the core concepts of trauma informed care, the impact of trauma on daily functioning, and specific ways to implement this model into practice immediately.



Trauma informed care is applicable for all levels of service providers and is effective for enhancing leadership competency, team collaboration, client management skills, selfregulation skills and empathy. Case studies will be reviewed for demonstrating how to implement a trauma informed approach. Evidence supporting the benefits of trauma informed care will be discussed, and a literature review will be provided.

Learning Objectives

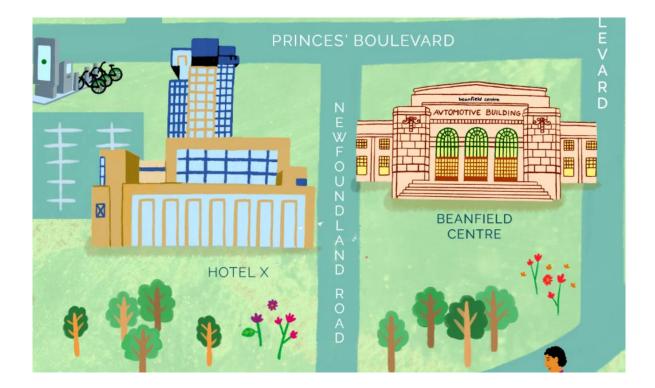
- Learn how to transition to a trauma informed practice model and initiate change in your organization and with ABI/Concussion clients
- Learn creative ways to identify signs of trauma in clients, address challenges differently, recognize neurodiversity and different learning styles and approach colleagues, clients and others with a trauma informed lens
- Learn to implement trauma informed care practices into your daily roles and initiate changes within your organization
- Learn to educate clients and family members on the impact of trauma on daily functioning and learn unique ways of addressing these challenges with new insights
- Learn grounding strategies for emotional regulation to use with clients and colleagues

15:15 – 15:45 Pre-Function C & D	Afternoon Break and Sponsor Exhibit Viewing

Keynote Address Ballroom D	Jane Enright
15:45 – 16:45 Ballroom D Ground floor	O.M.G What's Next? Tips to initiate Positive Change, Transform Trials into Triumphs, and Land Butter Side Up with a Health Outlook Jane Enright, brain injury survivor, inspiring award-winning Canadian author, wellness expert, and inspirational speaker
	Jane Enright has survived and thrived after living through three life-altering events, including a life-threatening traumatic brain injury. This began an incredible transformational journey of resilience, courage, and triumph over tragedy. Jane's message of empowerment and resilience will astound and inspire you.
	 Learning Objectives Identify strategies for resilience, strength and creativity Learn about empowerment and avoid the "Why me?" syndrome Actionable ideas to overcome adversity, cultivate positive outcomes, and initiate new beginnings with a health outlook
16:45 – 17:25 Ballroom D Ground floor	Industry Update Accident Benefits Reform: Embracing the Change Oatley Vigmond Personal Injury Lawyers & McLeish Orlando Lawyers LLP Adam Little, Partner, Oatley Vigmond & Lindsay Charles, Partner, McLeish Orlando



17:25 – 17:30 Ballroom D Ground floor	 This presentation will provide an overview of the recent changes in accident benefits reform. Attendees will gain insights into the implications of these reforms and how to navigate the new regulations effectively. Learning Objectives: At the end of the session, participants will be able to identify the key changes and determine modifications to their practice to navigate the changes successfully. Closing of Day 1
19:00 – 21:00 Hotel X	Networking Social – sponsored by Personal Injury Alliance (PIA) Open to all who registered to attend the networking event but RSVP is required . <i>Hotel X is located across the street from the Beanfield Centre and is connected by the Sky bridge,</i> <i>accessible from the second floor of the Beanfield Centre</i> .





07:30 – 08:45 Pre-Function C & D 08:45 – 09:00 Ballroom D Ground floor	Breakfast Greetings
Keynote Address Ballroom D	Dr. Dawn Neumann
<mark>09:00 – 10:00</mark> Ballroom D Ground floor	Evidence-based Treatment Approaches for Teaching Emotion Recognition after Brain Injury Dr. Dawn Neumann , PhD, FACRM Associate Professor, University of Florida Morsani College of Medicine - Department of Neurosurgery and Brain Repair
	Many patients with brain injury often have trouble recognizing others' feelings. This can make it more challenging to empathize and emotionally connect with others, contributing to relationship problems and loneliness. Unfortunately, this deficit often goes untreated. This presentation will provide a brief overview of the evidence behind a clinical intervention that has been classified as a practice standard for treating emotion recognition deficits after brain injury. The majority of the presentation will be spent reviewing the intervention components, which has been developed into a freely available electronic App. The presentation will conclude with current research efforts to address past limitations and further advance the treatment of emotion recognition and empathy deficits after brain injury.
	 Learning Objectives Describe the evidence of an emotion recognition training program Describe the treatment approaches for training emotion recognition after brain injury and how to access the free treatment App Discuss new research efforts to improve emotion recognition and empathy after brain injury injury
10:00 – 10:30 Pre-Function C & D	Break & Last Chance to Vote for the People's Choice Awards
Concurrent #4 The following thre 10:30 – 11:30 C#4, Session A Ballroom D Ground floor	ee sessions will run concurrently from 10: 30 — 11:30. Select one session to attend. Characterizing Sleep and Wakefulness Post-Concussion in the General Population: Consideration of Precipitating Factors to Inform Prevention and Treatment of Sleep-Wake Disorders

Day 2: Friday December 6, 2024 | Beanfield Centre, Exhibition Place



Toronto abi Network CONFERENCE 2024 Connecting • Learning • Inspiring

Catherine Wiseman-Hakes, PhD, School of Rehabilitation Science, McMaster University, and Hull Ellis Concussion and Research Clinic, Toronto Rehabilitation Institute – University Health Network

Evan Foster, MHSc, Hull-Ellis Concussion and Research Clinic, Toronto Rehabilitation Institute – University Health Network

'Good' sleep, concurrent with daytime alertness, is crucial for physical and mental health, cognitive function, emotional well-being, and overall quality of life, regardless of age or life stage. This becomes even more important during recovery from a concussion or mild traumatic brain injury as sleep plays a critical role in recovery and neuroplasticity. Sleep disturbances, such as trouble falling or staying asleep, or lack of restorative sleep, are common post-concussion. Left untreated this may prolong recovery and is associated with comorbidities e.g., mental health issues. Understanding the underlying factors driving sleep disruptions is essential for effective intervention. Our understanding of sleep in the acute stage of concussion, its role in recovery, and associated risk factors for the development of chronic sleep disturbance, especially in non-athlete and non-military populations is emerging. This presentation will provide an overview of sleep and its role in brain health across the lifespan, describe the changes in sleep in response to concussion, and discuss strategies to identify, assess, and treat sleep disturbances to prevent chronic sleep disturbances and persisting symptoms after concussion.

Learning Objectives

- Understand the importance of sleep in concussion recovery: Participants will describe the 'typical' trajectory of sleep following concussion, and explain the critical role of sleep in physical, cognitive, and emotional recovery following a concussion or mild traumatic brain injury (mTBI).
- Identify common sleep disturbances post-concussion: Participants will be able to recognize and differentiate between various sleep disturbances commonly experienced after concussion, including hypersomnia (too much sleep), insomnia (too little sleep), and a lack of restorative or restful sleep; including at what time points individuals commonly experience these difficulties.
- Explore underlying factors contributing to sleep disruptions: Participants will gain insight into the multifactorial nature of sleep disturbances post-concussion, including neurobiological changes, psychological factors, and environmental influences.
- Discuss strategies for effective intervention: Participants will learn about evidencebased strategies for assessing and treating sleep disturbances post-concussion, including education about sleep hygiene practices, non-pharmacological therapies, and pharmacological interventions (only when appropriate!).
- Address challenges in non-athlete and non-military populations: Participants will recognize the unique challenges and considerations in identifying and managing sleep disturbances post-concussion in non-athlete and non-military populations, including low-resource screening techniques for sleep disturbances post-concussion.
- Preventing chronic sleep issues: Participants will be able to apply strategies aimed at preventing the development of chronic sleep issues through early identification, targeted interventions, and ongoing monitoring of sleep quality and recovery.



10:30 – 11:30 C#4, Session B Room 200C 2 nd floor	 What is the Impact of a Pain Management Group for People with Neurological Conditions and Persistent Pain? A Pilot Study J. Bronwen Moore, BScOT, MA, OT Reg (Ont) Toronto Rehabilitation Institute – University Health Network, Adjunct lecturer with University of Toronto Sarah Sheffe, BA, MScOT, OT Reg (Ont) - Occupational Therapist, Toronto Academic Pain Medicine Institute
	This mixed methods pilot study explored psychological and functional outcomes of a Pain Management Group (PMG) for clients with persistent pain and neurological conditions including brain injury.
	 Learning Objectives Identify the connection between brain injury and pain Explore evidence for the effectiveness of pain self-management education for clients with brain injury Learn about a Pain Management Group designed specifically for clients with brain injury and other neurological conditions Revie results of a research project that evaluates the effectiveness of this treatment program Get practice tips for working with pain and brain injury
10:30 – 11:30 C # 4, Session C Room 200A 2 nd floor	Weathering the Perfect Storm: Building Capacity to Address Co-Occurring Brain Injury, Substance use, and Serious Mental Health Disorders Carolyn Lemsky, PhD, CPsych Clinical Neuropsychologist and Clinical Director at CHIRS and TABIRS - Toronto Acquired Brain Injury Rehab Specialists
	We know that each day, thousands of Canadians find their lives upended by brain injury, serious mental health disorders and/or problematic substance use. Each condition on its own can wreak havoc in the lives of our clients and their families. The focus of this presentation will be on ways to build capacity to address the perfect storm that develops when these conditions occur together. This presentation will include a discussion of long-term outcomes of a small cohort of clients to illustrate the benefits of sustained intervention in the community. Essential skills for brain injury providers will be discussed with an emphasis on the common strategies used in psychosocial rehabilitation across diagnostic categories. Resources for supporting a continuum of care across service sectors will be introduced.
	 Learning Objectives: Attendees will be able to identify skills and strategies commonly used in brain injury rehabilitation which may also be applied when addressing substance use disorders. Attendees will be able to recognize the value of long-term community supports that reduce harms and support families. Attendees will know how to access free resources to build their own capacity and to establish effective in partnerships with mental health and addiction providers



11:30 – 12:30 Pre-Function C & D	Lunch & Networking
Keynote Address	Adrienne Patterson
Ballroom D	
12:30 - 13:30	Sharing Scars: Sharing My Personal Journey of Challenges, Traumas, and Triumphs with
Ballroom D	TBI and PTSD
Ground floor	Adrienne Patterson, BES, BEd – Ontario Educator
	"The scars you share become lighthouses for other people who are headed to the same rocks you hit", a quote by author Jon Acuff, has become a way of being for Adrienne. After a number of professional events, stresses, traumas, and injuries, that have impacted her physical and psychological health, she has been on a recovery journey for a number of years. She will share her story of injury and trauma and how she had to fight and advocate for appropriate care, support, strategies, and treatments. Her story will illuminate the importance of support from a wide variety of providers and the importance of thinking outside the box for ways to support the ABI client in their quest for healing.
	Learning Objectives
	 Participants will hear the story of Adrienne's personal journey and understand the importance having proficient health care providers who can collaborate with other disciplines and advocate for their clients. Participants will take away a greater understanding of the vulnerabilities ABI clients face when they interface with healthcare systems and providers and the need for support systems and advocates to help protect the patient and manage daily care. Participants will take away a range of strategies, skills, and approaches that will help them manage their ABI clients and be an effective part of the advocacy team
13:30 - 13:40	"We Exist": Culturally Constructed ABI (Acquired Brain Injury) Narratives from a Disability
Ballroom D Ground floor	Studies Perspective Hilary Pearson, MEd, PhD Candidate - Dept. of Social Justice Education at the Ontario Institute for Studies in Education, University of Toronto, Brain Injury Society Toronto
13:40 – 14:00 Ballroom D Ground floor	Closing Remarks, Presentation of People's Choice Award, Sponsor Prize Winners