

National Association of Social Workers (NASW) Post-Test

The Continuum of Care for Severe Brain Injury and the “Case” of Massachusetts

National Association of State Head Injury Administrators (NASHIA)

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1. The continuum of care for severe brain injury includes _____, hospital-based services, post-hospital services and community programs.
 - a. Cost analysis
 - b. Prevention
 - c. Policy making
 - d. Medicaid services

2. What are some typical gaps in the continuum of care at the state level?
 - a. Transitions (case management, resource facilitation)
 - b. Post-acute rehabilitation
 - c. Transportation

 - d. All of the above

3. Ethical considerations in tracking data and evidence about services and supports for the chronic brain injury population include:
 - a. The wide range of possible brain injury outcome measures,
 - b. Inconsistent use of such measures
 - c. Delay in generating evidence from randomized controlled trials. True/False

 - d. All of the above

4. Typical strengths in the continuum of care for severe brain injury may include governance, post-acute rehabilitation, _____ (also known as case management, resource facilitation), data for decision-

making and community (Medicaid waivers).

- a. Transitions
- b. Skilled nursing facilities
- c. State trust funds
- d. Clinical trials

5. What are some state-level strategies for informing and educating policymakers about the continuum of care for severe brain injury?

- a. Supporting independent study of public health topics of state interest.
- b. Identifying gaps and strengths.
- c. Making recommendations through independent entities.
- d. All of the above.

6. In most state systems, which populations are most often missed with regard to the reporting of traumatic brain injury?

- a. Children
- b. Veterans
- c. Those not treated in Emergency Department settings
- d. All of the above

7. Match the Symptom Domain to the appropriate Description:

____ Cognitive Function	A. Increased aggression and childlike behavior that contributes to difficulties returning to work or school, personal relationships, and social functioning.
____ Social Role Participation	B. Nerve damage, impairment in motor function (e.g. walking), strength and coordination, and loss of sense of touch, smell, taste, which may increase difficulties performing day-to-day activities.
____ Physical Function	C. Can include work, volunteering, recreation and leisure pursuits, and social and family role function.
____ Behavioral Function	D. Impairments in attention, memory, executive function.

8. Extension from residential neurorehabilitation; live at home or in the community and focus on skills use - describes what stage in the post-hospital continuum of care:

- a. Post-hospital Community Neurorehabilitation Care
- b. Neurobehavioral Intense
- c. Day Treatment
- d. Supported Living

9. When considering what measures to include when evaluating evidence of rehabilitation outcomes, consumer perspectives are _____ relevant.

- a. Never
- b. Sometimes
- c. Always
- d. Not really

10. Including the perspectives of individuals with severe brain injuries collected using structured qualitative and participatory approaches is ethical decision-making practice.

True False

Name: _____ Date: _____