



TABLE OF CONTENTS

Page 2: A word from Headway's Director, Ron Fernandez

Page 3-4: March is Brain Injury Awareness Month

Page 5-9: Managing Concussions Among Youth

Page 10-11: From a Brain Injury Survivor

Page 12: Brain Injury Peer Support Group

Page 13: Headway's New Employee Highlights



HEADWAY
OF WESTERN NEW YORK, INC.

AN AFFILIATE OF PEOPLE INC.

Newsletter

WWW.HEADWAYOFFWNY.ORG



SPRING IS ALMOST HERE!

Did you know? Smelling skunks is a sign of spring coming! Maybe skunks aren't *all* that bad...



KEEP YOUR MIND SHARP! PLAY GAMES



[Click here](#) to play a letter arrangement game. Use the given letters to create 12 words from them. You have to use the letter in the middle, and you can use any of the letters more than once.

BEST BRAIN-BOOSTING FOODS: WHAT TO EAT FOR BETTER MEMORY AND FOCUS

- Salmon and Other Fatty Fish
- Eggs
- Blueberries
- Leafy Greens and Cruciferous Vegetables (spinach, kale, arugula, broccoli, cauliflower, brussels sprouts)
- Nuts
- Coffee (in moderation)
- Dark Chocolate
- Olive Oil



A WORD FROM OUR **DIRECTOR, RON FERNANDEZ**



Living most of my life in Western New York, I experienced March as a month of transition; hope for the Spring; warm and freezing St. Patrick's days; the leap to daylight savings time; and the month designated to highlight awareness of Traumatic Brain Injury (TBI).

March is certainly living up to its reputation, with the Department of Health announcing they have hired the new director of waiver programs for New York State; with a public declaration coming shortly; Headway planning our first gala since the Covid Pandemic with October identified as the month it will occur.

We are in the second month since DOH announced the Cap on referrals for the Nursing Home Transition (NHTD) Waiver program. Headway staff continue to provide quality assurance, review service plans, vetting new providers for the DOH, providing technical assistance and working with applicants whose referrals were made before January 26th. For detailed information regarding the NHTD Waiver Cap go to [Nursing Home Transition and Diversion Medicaid Waiver Program](#). The plan is that at a future date (not yet determined), there will be enrollment slots for this program.

We want to be clear that the Traumatic Brain Injury (TBI) waiver continues to function as it always has, with no restrictions on referrals. We still hear from the public that they were not aware of such a program, so we continue to make sure that the word gets out regarding both programs that have helped so many and will continue to do so.

There are also openings in our TBI Support group that meets online. If you are interested in attending the support group or want to be a member of Headway if you are not already, send us an email at support@Headwayofwny.org



Director of Headway of WNY, Ron Fernandez

MARCH IS BRAIN INJURY AWARENESS MONTH!

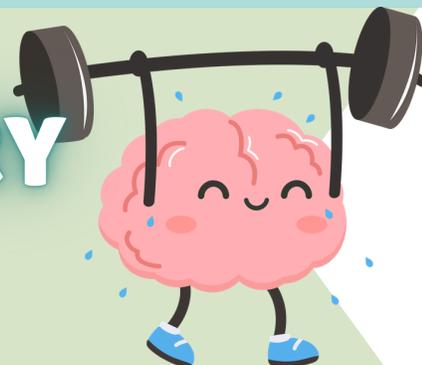
Every brain injury story is a story of strength. We honor the resilience of survivors, the devotion of caregivers, and the power of community in turning challenges into hope.



Follow us on social media!
www.headwayofwny.org

 [@headwayofwny](https://www.instagram.com/headwayofwny)
 [@headwayofwny](https://www.facebook.com/headwayofwny)

MARCH IS BRAIN INJURY AWARENESS MONTH!



SHARE YOUR BRAIN INJURY STORY

There are many brain injury misconceptions, so sharing your story with the people in your life can help reduce stigma while encouraging others to do the same. You can also help us raise awareness by sharing your story with us. Email us at support@headwayofwny.org. All month long and beyond, we are sharing facts on concussion and brain injury with our online community to spread awareness.



EDUCATE YOURSELF

Concussion is not just a sports injury. It can affect anyone at any time. Recognizing the signs and symptoms of concussion is crucial to protecting yourself and your family. Symptoms are fairly consistent across age groups, meaning children and adults usually experience the same “off” feelings. Irritability, balance issues, blurred vision and more are common symptoms of concussion.

TALK TO YOUR CHILDREN

Concussion can leave a life-long impact, so it’s important for parents to talk to their children about head safety. Parents should be their child’s advocate by teaching their child to speak up when they’re injured, properly preparing their child for sports and maintaining an open dialogue to encourage their child to speak up if they experience a head injury.



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MANAGING CONCUSSIONS AMONG YOUTH

Written by Dr. Leddy and Jacob McPherson of UB

Jacob McPherson PhD is Headway of WNY's Chairman of the Advisory Council & is a clinical associate professor in the Department of Rehabilitation Science at UB

Researchers around the world, including internationally known concussion expert John J. Leddy, clinical professor of orthopedics and sports medicine in the Jacobs School of Medicine and Biomedical Sciences, have developed an easy-to-follow guide so parents and coaches can recognize concussions in young athletes and respond appropriately.

“Concussion Recognition: A Guide for Parents and Coaches,” published Nov. 5 in the [Archives of Physical Medicine and Rehabilitation](#) and available to the public, was developed in response to concerns that because qualified athletic trainers aren't always on hand at youth sporting events, coaches and parents should know the signs of concussion and what to do if they see them.



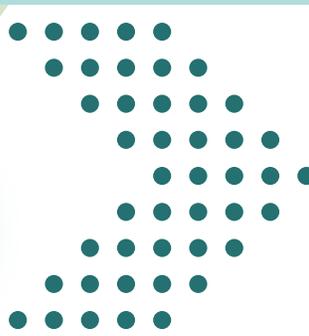
‘RECOGNIZE AND REMOVE’

The bottom line is “recognize and remove,” the authors say. Evidence shows that earlier recognition and removal of the athlete is correlated with a quicker return to competition.

“So if you're telling parents that you can reduce your child's recovery time by half, that's probably pretty good motivation to remove them and get them into a health care provider as quick as possible,” says Leddy, who is also director of the Concussion Management and Research Center at UBMD Orthopedics and Sports Medicine.

“They don't have to diagnose it,” he says. “They just have to suspect it. If they suspect it, then the advice is to take that athlete out of the sport, remove him or her from further risk and get them seen by a medical professional who knows how to evaluate this condition.”

MANAGING CONCUSSIONS AMONG YOUTH (CONTINUED)



Lead author Ruairi Connolly, a psychiatrist at Cork University Hospital in Ireland, says that while the article is based on two leading scientific documents in the field, the team purposely wrote the guide using accessible language. They collected feedback on the wording in their draft from coaches and parents before the article was published.

The article includes a QR code that links to a two-page [“Concussion Recognition ToolDownload pdf”](#) that can be used by non-medically trained individuals to identify and manage a suspected concussion.

DESIGNATING A PARENT

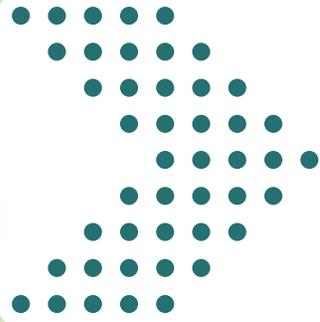
Co-author Jennifer Wethe, former director of the Mayo Clinic Arizona Concussion Program, suggested that parents adopt a “safety officer model” in which there is a designated parent who knows what to look for.

“Coaches are very busy. Getting this into the hands of motivated parents is how I think this information can make it to the grassroots level,” she says. “Don’t underestimate the power of highly motivated parents who are concerned about something like this. I see a lot of explaining away injuries unless there is something very specific to follow. Parents and coaches need a protocol, something they can go through step by step.”

The researchers stress that concussions happen in many sports besides football. Wethe cites ice hockey, biking, soccer, volleyball – even cheer squad. Connolly notes rugby and something as simple as “someone falling over outside playing in the schoolyard.”



MANAGING CONCUSSIONS AMONG YOUTH (CONTINUED)



Jaclyn Stephens, co-author and Colorado State University associate professor and occupational therapist, emphasizes that young women athletes also need to be considered, since some studies have shown a higher prevalence of concussion among female athletes, which may be related to differences in neck muscle strength. “If we only think about concussion as a professional football problem, we’re failing to consider female athletes,” she says.

Stephens and co-author Ann Guernon, associate professor of speech-language pathology at Lewis University, recently co-chaired the Athlete Development and Sports Rehabilitation Networking Group for the American Congress of Rehabilitation Medicine. The researchers’ article is based on that definition of concussion/mild traumatic brain injury, as well as the 6th International Consensus Statement on Concussion in Sport.

In addition to Connolly, Guernon, Leddy, Stephens and Wethe, the authors represent a variety of fields, from physical therapists to medical doctors to neuropsychologists to speech therapists.

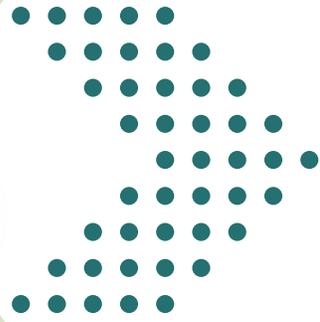
STEPS FOR PARENTS AND COACHES

Observe: During practice and games, watch for signs of injury, such as loss of balance, confusion or holding the head after a hit.

Ask the athlete: *How do you feel? What happened?* If they have trouble remembering or have gaps in their memory, it may be a sign of concussion. Ask if they have headaches, dizziness, blurry vision or balance problems.



MANAGING CONCUSSIONS AMONG YOUTH (CONTINUED)



When to seek urgent medical care: If the athlete shows any of the following signs, seek medical help immediately:

- Loss of consciousness (even briefly).
- Repeated vomiting.
- Severe or worsening headache.
- Seizures or convulsions.
- Becoming more lethargic and/or confused.
- Weakness or numbness in limbs.
- Severe neck pain.



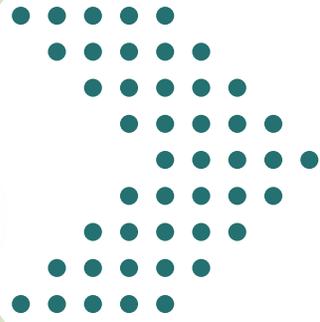
What to do if you suspect a concussion:

The golden rule: “If in doubt, sit them out.”

If you suspect a concussion, remove the athlete from play immediately. Continuing to play with a concussion can cause serious complications, including second-impact syndrome, a very rare but potentially life-threatening swelling of the brain that can occur when a second concussion happens before the brain heals from the first concussion.



MANAGING CONCUSSIONS AMONG YOUTH (CONTINUED)



Recovery and return to play

Rest first: The first 24-48 hours after a concussion should involve relative mental and physical rest. The athlete can walk and do light activities of daily living. They should reduce screen (phone) use, demanding schoolwork and intense exercise during this time.

Slowly resume activity: After the initial relative rest period, light physical activity can be introduced slowly, but only under the supervision of a health care professional, such as primary care physicians, pediatricians, sports medicine specialists and athletic trainers.

Follow medical guidance: Never allow the athlete to return to play until they are evaluated by a health care professional experienced in concussion management. Gradual return to full sport participation should follow the health care provider's recommendations. Persistent symptoms lasting more than four weeks warrant referral to a concussion specialist.



FROM A BRAIN INJURY SURVIVOR...

Hi, my name is Brandon Scheid and I suffered a severe TBI resulting from a pretty serious paragliding crash. I wanted to take a little bit of time to shed some light on the crazy, difficult, strange, emotional, and life changing process of recovering from a TBI.

As I learned there is not “going back” to your old life, or the old you. There is only accepting your new trajectory, making the most of what tools you have, and trying to find a path through the often confusing and frustrating world of TBI. Without the support of my wife, family, and community there is no possible way I would be here right now sharing this tale.

The word that best describes my journey is confusing. There is no straightforward path to recovery, and while your brain is healing nothing quite makes sense. It is frustrating, and difficult, mostly to those you care about. They are the ones sitting in the hospital, they are the ones driving you to all your appointments, they are the ones you take your emotions out on. The worst part about all of it is the injury is not visible, no one really can see what you’re struggling with, and until you have a TBI you’ll really never understand. Everything changes in the blink of an eye; nothing is the same ever again.



Brandon Scheid, Brain Injury Association Of America

FROM A BRAIN INJURY SURVIVOR (CONTINUED)

However I am here as a testament to the truth that you can get through it. You can get back to somewhat of a “normal” life. You can do the things you love again and you can certainly be grateful you’re on the other side. It takes the right team, the right attitude, a ton of perseverance, some faith, and a whole lot of help. I used every tool at my disposal, ingested any/all information I could get my hands on related to TBI recovery, and even with all of that, 2 years later I am still recovering.

The reason I feel compelled to share my story is to give others hope, that they too can make it through their TBI journey with some success. I know it feels impossible and you want to give up, but just taking one small step a day towards your recovery goals is all you need to focus on. Lots of small steps in the long run add up to make a huge distance. While it may feel super daunting, focus on what you can control, practice daily gratitude, and let go of your desire to quickly get your outcome. It is a journey; one I am super grateful I was put on. It has changed my life, in good and bad ways, but it is my path and I am so lucky to be able to walk it.

No amount of regret can change the past, no amount of worry will change the future, but any amount of gratitude changes the present. I truly believe that TBIs can be overcome, and I am living proof of that belief.

If you or someone you know has a neurocognitive disorder & would like to share your story, please email us at support@headwayofwny.org

BRAIN INJURY PEER **VIRTUAL SUPPORT GROUP**



**First & Third Wednesday of the
month from 2 to 3pm**

Free to the public!

**Apply to join by emailing support@headwayofwny.org
with your name and phone number or call 716-408-3110.**

Headway offers a Brain Injury Peer Support Group through our telehealth online platform. The support group is a space for individuals navigating the challenges of brain injury to connect, share experiences, and find strength in community. Through shared stories, members can gain valuable insights, reassurance, and encouragement to persevere through the ups and downs of their recovery process. Within this safe environment, participants find community in knowing they are not alone in their journey.



NEW EMPLOYEE HIGHLIGHTS

JAKE FRUTH, ASSISTANT REGIONAL RESOURCE DEVELOPMENT SPECIALIST

Jake is excited to start a new chapter in his life at Headway after spending his last three years working with grades K-6 at the Boys and Girls Clubs. An avid Packers fan, he also spends his Sundays with his turtle, Shelly. His latest read was The Thursday Murder Club series, and he's always interested in hearing about your latest mystery or horror recommendation.



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