

TBIs & Concussions: Diagnosis and Treatment Dilemmas

Chairperson: Edward M. Moriarty, Jr., Esquire
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3:40-4:20pm

Home and Community Model of Rehab for mTBI

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Home and Community Rehab Model for mTBI

8–24+ HOURS/WEEK
INTERDISCIPLINARY
THERAPY

DELIVERED IN
MEANINGFUL
ENVIRONMENTS

GOAL-DRIVEN,
NEUROPLASTICITY-
BASED APPROACH

Disclosures

None to disclose

1. Person-Centered
2. Self-Determination & Choice
3. Community Integration & Inclusion
4. Environmental Adaptation & Home Safety
5. Family & Community Engagement
6. Quality Assurance and Outcome Monitoring

HALLMARKS OF H&C REHAB

1. **Improved** functional and meaningful outcomes
2. **Enhanced** motivation and patient engagement
3. **Return to productive activity**
4. **Cost Effective**
 - Less expensive than inpatient or facility-based care
 - Reduced risk of complications and rehospitalizations
 - Improved long term health and recovery
 - Decreased need for paid supervision or assistance

VALUE IN H&C BASED MODEL

Home and Community Model

Functional
Barriers
Addressed



Sensory



Physical



Behavioral
Mood



Cognition

Common Symptoms addressed



Feeling off balance



Unable to tolerate busy places



Overwhelmed after 1-4 hours



Headaches with >1 hour of activity



Inability to track visually or recall



Familiar and novel task challenge



Case Study

Initial Presentation:

- Mobility and balance impairments, dizziness
- Visual and cognitive deficits
- Photophobia, mood instability, and insomnia
- **Unable to work**

Home & Community Impact:

- **Significant resolution of dizziness**
- Improved attention/working memory
- Reduced symptom burden, mild visual disturbance

Outcomes:

- **Returned to work >4 hours/shift**
- Measurable gains SWLS and **20-point gains on MPAI**
- Continued improvement at 3-month post



Thank you!

Innovations in Holistic Health Services for TBI to Increase Community Reintegration

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Disclosures

None

TBI is common, chronic, complex

- › Siloed medical care, insurance-caps, gaps in long-term holistic services

Science of Resilience

Process of adapting to adversity and significant sources of stress

Yoga & Mindfulness

- physical movement › balance
- breathing exercises › emotional regulation
- meditation › mood, attention

Building a more holistic, integrated healthcare system



**Medical
System >
inpatient &
outpatient**

**Community-
based >
Online**

**Community-
based > In-
person**

Thank you!

Attorney's Role in Representing Injured Worker with Traumatic Brain Injury

EDWARD M. MORIARTY, JR., ESQUIRE

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Disclosures

None

I. Identify Injury:

A. Traumatic Brain Injury: Rule In or Rule Out.

B. If Rule Out, Different Set of Care, Standards, and Practices Apply.

C. If Rule In, Be Aware of Serious Diagnosis, Prognosis, Treatment Plan, and Long-Term Effects, Medical and Vocational.

II. Represent Client's Best Interest:

A. Employee: Best Medical Care and Treatment with Rehabilitation, Physical Therapy, Occupational and Vocational Therapy, with Full Monetary Benefits as needed.

B. Insurer: Treat Consistent with Best Medical Standards and Practices, including Medical, Physical Therapy, Occupational and Vocational Therapy, with Reasoned and Adequate Reserves for Monetary Benefits, including Temp Total, Temp Partial, Permanent and Total, and Loss of Function, and, of course, Medical and Rehabilitation.

III. Traumatic Brain Injury: One of the Most Significant Short and Long Term Industrial Injuries:

A. Traumatic Brain Injury: Know it When you See it and Act Accordingly.

B. Act in the Best Interest of Patient, Client, Insurer, and Insured

Thank you!