



Brainstorming Solutions Tool

Person Served: _____

Date: _____

Current Challenge: (describe as completely as you can: what circumstances, what the difficulty is, what the environment is like)

What goal of theirs will solving this help them achieve? _____

Directions: Write what you know about each area. Give examples if helpful. Consider how the environment [the situation around them] impacts them. For each area, write what helps them. Fill out only the areas that make sense for this challenge or this person.

*Consult the **Brainstorming Solutions Tool Guide** for more information about what these abilities are.

Abilities

Attention (consider visual, verbal, how long the person can pay attention)	
Processing Speed (how fast or slow does someone need to talk for the person to best understand)	
Memory Storage (consider visual, verbal, ability to learn new information, remembering short term or long term)	
Memory Retrieval (what helps the person to pull information out of their memory)	
Initiation (is the person able to start things on their own or do they need help getting started)	
Awareness (does the person know they have a problem with something, do they know when it is happening, can they predict when it will happen)	

<p>Impulse Control (can the person stop themselves from doing or saying something)</p>	
<p>Flexibility (does the person get stuck on a word, thought or behavior or can they easily shift)</p>	
<p>Understanding Language (does the person have difficulty understanding when it's too fast, too complex, too long)</p>	
<p>Speaking (how well does the person convey their ideas, do they speak clearly, do they have trouble finding words)</p>	
<p>Organization (how well does the person organize their things, their room, their workspace)</p>	
<p>Planning (is the person able to plan their task, their day, their week; can they make a plan to solve a problem)</p>	
<p>Problem Solving (how well the person can think of multiple solutions to a problem and decide on best solution given evidence)</p>	
<p>Judgement (does the person make safe decisions in the home, at work, in the community)</p>	
<p>Vision (how well does the person see, do they have blurry or double vision, do they need glasses)</p>	
<p>Motor Ability (how do the person's arms and legs function, how is their balance, can they physically care for themselves)</p>	
<p>Social (does the person pick up on facial cues/body language, do they express themselves with facial cues/body language, do they tolerate frustration, able to adjust to changes)</p>	

Emotional State (consider psychiatric diagnoses and current general emotional state – sad, anxious, angry, fearful, happy)	
Environment (what type of environment does the person work best in, think about noise and visual distractions, number of people)	

Behavior

Helps have appropriate behavior (consider environment, people, way of speaking to the person, sleep, eating at set times, access to fun activities)	
Triggers (what sets off unwanted behavior, consider environment, people, way of speaking to the person, poor sleep, not eating, not getting to do what they want)	
Helps calm when triggered (no words/quiet, specific words or way of interacting, an object, a person, an activity, a distraction)	
What is the person’s behavior attempting to communicate	
How can I help the person communicate in a different way	

Recent Changes

Medication
Injuries/Illnesses
Other
Did a problem start or get worse when the change was made?

Solutions (Things to try) / Strategies

<p>What I need to do to support them. (Exs: cue the person when they forget, point to a picture reminder, do the step they can't)</p>	
<p>Internal Strategies the person can use (repeating it to themselves, asking themselves a question when they get stuck, a rhyme)</p>	
<p>External Strategies the person can use (a calendar, a checklist, pictures, a timer, an app, their phone, a notebook, organizing bins)</p>	
<p>Environment Changes (close doors, get rid of noise, get rid of clutter, put what they need near the door)</p>	

Share the proposed solutions/strategies with the person, listen to their suggestions and concerns and obtain agreement to implement the new approach.

<p>The person's thoughts, ideas and concerns</p>	
---	--

Evaluation and Plan

<p>How did these changes and strategies work?</p>	
<p>What will I try next time?</p>	



Brain Links is supported by the Administration for Community Living (ACL) of the U.S. Department of Health and Human Services under Grant No. 90TBSG0024-01-00 and in part by the TN Department of Health, Traumatic Brain Injury Program.