Dear Governor Bryant and Members of the Mississippi Legislature:

As the Executive Director of the Mississippi Department of Rehabilitation Services, I am proud to present the 2013 Traumatic Brain Injury/Traumatic Spinal Cord Injury Trust Fund Annual Report. The Trust Fund Advisory Council Members, along with other individuals interested in expanding services to people with spinal cord and traumatic brain injuries, have generously contributed their time, expertise, and enthusiasm in carrying forward the intent of the original legislation. It is a privilege to report the continued good progress of the Trust Fund and its partners who provide the much-needed resources for Mississippians with traumatic brain and spinal cord injuries.

Every effort has been made by the members of the Trust Fund Advisory Council and the staff of the Mississippi Department of Rehabilitation Services to identify, address, and implement the components and objectives of the Trust Fund. Because of the services made possible by the Trust Fund, Mississippians with traumatic brain and spinal cord injuries are better able to strive for and achieve an improved quality of life following injury. The continued implementation of the Traumatic Brain Injury/Spinal Cord Injury Home and Community-based Waiver, which utilizes dollars from the Trust Fund to match federal dollars to extend services to more individuals with Traumatic Brain Injury or Spinal Cord Injury, has been fundamental to the success of effectively serving these individuals. This program allows individuals to live in their own homes surrounded by their families and caregivers instead of a nursing or institutional facility.

During FY 2014, we will continue to pursue all possible funding alternatives and resources to leverage the maximum drawdown of available federal funds. We will continue our efforts to encourage interagency collaboration while working to develop new services for our clients. The staff of the Mississippi Department of Rehabilitation Services continues to work diligently to ensure that the necessary resources for individuals who have sustained a traumatic brain injury or spinal cord injury are available today and in the future. Also, we have continued our prevention/education efforts with our DRV NW-TXT L8R campaign and “Use Your Brain” helmet giveaway program. At FY 2013 end, approximately 5000 DRV NW-TXT L8R pledge cards had been signed and over 30,000 helmets distributed. Our FY 2014 plans will include hunter safety and youth sports concussions awareness messages. All of our campaigns have received a great response and we will be persistent in promoting these messages of prevention.

Sincerely,

H.S. McMillan, Executive Director
Mississippi Department of Rehabilitation Services
# TABLE OF CONTENTS

<table>
<thead>
<tr>
<th>Section</th>
<th>Title</th>
<th>Page</th>
</tr>
</thead>
<tbody>
<tr>
<td>Section 1</td>
<td>Vision</td>
<td>4</td>
</tr>
<tr>
<td>Section 2</td>
<td>Eligibility</td>
<td>4</td>
</tr>
<tr>
<td>Section 3</td>
<td>Funding</td>
<td>4</td>
</tr>
<tr>
<td>Section 4</td>
<td>Program Administration</td>
<td>4</td>
</tr>
<tr>
<td>Section 5</td>
<td>Advisory Council</td>
<td>5</td>
</tr>
<tr>
<td>Section 6</td>
<td>TBI/SCI Waiver</td>
<td>7</td>
</tr>
<tr>
<td></td>
<td>7.1 Durable Medical Equipment</td>
<td></td>
</tr>
<tr>
<td></td>
<td>7.2 Home Modifications</td>
<td></td>
</tr>
<tr>
<td></td>
<td>7.3 Vehicle Modifications</td>
<td></td>
</tr>
<tr>
<td></td>
<td>7.4 Respite Services</td>
<td></td>
</tr>
<tr>
<td></td>
<td>7.5 Personal Care Attendant Services</td>
<td></td>
</tr>
<tr>
<td></td>
<td>7.6 Emergency Services</td>
<td></td>
</tr>
<tr>
<td></td>
<td>7.7 Case Management</td>
<td></td>
</tr>
<tr>
<td></td>
<td>7.8 Transition Assistance Services</td>
<td></td>
</tr>
<tr>
<td>Section 7</td>
<td>Direct Client Services</td>
<td>7</td>
</tr>
<tr>
<td>Section 8</td>
<td>Grant Projects</td>
<td>11</td>
</tr>
<tr>
<td></td>
<td>8.1 Prevention and Education</td>
<td></td>
</tr>
<tr>
<td></td>
<td>8.2 Transitional Living</td>
<td></td>
</tr>
<tr>
<td></td>
<td>8.3 Recreation Projects</td>
<td></td>
</tr>
<tr>
<td>Section 9</td>
<td>Total Expenditures</td>
<td>19</td>
</tr>
<tr>
<td>Section 10</td>
<td>Annual Nursing Home Survey</td>
<td>19</td>
</tr>
<tr>
<td>Section 11</td>
<td>SCI and TBI Registry</td>
<td>20</td>
</tr>
<tr>
<td>Section 12</td>
<td>Other Activities</td>
<td>22</td>
</tr>
</tbody>
</table>
Section 1: VISION

In an effort to enable Mississippians with spinal cord injury and traumatic brain injury achieve their maximum level of independence, the 1996 Mississippi Legislature established the Traumatic Brain Injury/Traumatic Spinal Cord Injury (TBI/SCI) Trust Fund. The goal of the Trust Fund Program is to assist individuals who are severely disabled by traumatic spinal cord injury or traumatic brain injury to resume activities of daily living and to reintegrate into the community with as much dignity and independence as possible.

Section 2: ELIGIBILITY

Any resident of Mississippi, regardless of age, who has a severe disability as a result of a traumatic spinal cord injury or a traumatic brain injury and is medically stable, shall be eligible for services. Medical stability is defined as the absence of (a) an active, life threatening condition (e.g., sepsis, respiratory, or other condition requiring systematic therapeutic measures); (b) IV drip to control or support blood pressure; and (c) intracranial pressure or arterial monitoring.

For the purposes of this program, traumatic brain injury is defined as an insult to the skull, brain, or its covering, resulting from external trauma which produces an altered state of consciousness or anatomic, motor, sensory or cognitive/behavioral deficits. Spinal cord injury is defined as an acute traumatic insult to the spinal cord, not of a degenerative or congenital nature, but caused by an external trauma resulting in any degree of motor or sensory deficit.

The Trust Fund Program is the payer of last resort. An individual must seek assistance from all available resources prior to the Trust Fund’s participation in a service.

Section 3: FUNDING

Motor vehicle accidents remain the leading cause of both traumatic spinal cord and traumatic brain injuries in Mississippi. Funding for the TBI/SCI Trust Fund is provided through fees and surcharges on moving traffic violations. Collection of these surcharges began July 1, 1996. A $25.00 surcharge is collected from every violation of the Mississippi Implied Consent (Driving Under the Influence) Law, and $5.45 from all other moving vehicle violations.

Section 4: PROGRAM ADMINISTRATION

The Mississippi Department of Rehabilitation Services (MDRS) was designated by the Legislature to administer the Spinal Cord and Brain Injury Trust Fund Program. The MDRS Office of Special Disability Programs coordinates the direct services to eligible consumers, and a full-time program coordinator oversees the coordination of services. A variety of community-related integration programs are also provided through the Traumatic Brain Injury/Spinal Cord Injury Trust Fund via contracts with community organizations and agencies.
Section 5: ADVISORY COUNCIL

A ten-member advisory Council provides advice and expertise to the MDRS in the preparation, implementation and periodic review of the TBI/SCI Trust Fund Program. The composition of the Advisory Council was designated by legislation to include the following: (1) A physician with expertise in areas related to the care and rehabilitation of individuals with spinal cord injuries or traumatic brain injuries, (2) A professional in a clinical rehabilitation setting, (3) A representative designated by the Brain Injury Association of Mississippi, (4) A representative designated by the Mississippi Paralysis Association, (5) Three individuals with spinal cord injuries or traumatic brain injuries, and (6) Three family members of individuals with traumatic spinal cord or traumatic brain injuries.

Current Advisory Council Members

Dr. Edward Manning, Chairperson, Psychologist (Professional in Clinical Rehabilitation Setting) – Dr. Manning is a faculty member (Professor) in the Department of Neurology at the University of Mississippi Medical Center. He has worked extensively in the assessment and treatment of neurobehavioral aspects of brain injury. He is active in the Brain Injury Association of Mississippi and is past president of the association. He is a active member of a number of national professional associations in the fields of Clinical Psychology and Clinical Neuropsychology.

Dr. Howard Katz, Physiatrist, Brain Injury Specialist (Designee of the Brain Injury Association of Mississippi) – Dr. Katz has been chairman of the Board of Directors of the Brain Injury Association of Mississippi since its inception in 1989. In addition to his active involvement in organizations that promote services to individuals with brain injuries, he is well known for his individualized patient care. He works closely with brain and spinal cord injury survivors and their families to maximize independence and provide long term medical care management.

Ms. Natalie Ellis, (Designee of the Mississippi Paralysis Association) – Ms. Ellis has been on the Board of Directors for the Mississippi Paralysis Association since 1991 and currently serves as Executive Director. A spinal cord injury survivor since 1988, she is also Secretary on the Board of Directors for Living Independence For Everyone (LIFE) and actively involved in many community organizations.
Ms. Queen McGee, Family Member – Ms. McGee’s daughter, Shateca, is a traumatic brain injury survivor. At the age of 15, she sustained multiple injuries in a car accident that has affected the left side of her body. Presently, Shateca attends Belhaven College pursuing a degree in Art. Ms. McGee continues to be not only her daughter’s advocate, but also an advocate for all persons who have received a traumatic brain injury.

Mr. Cameron Stubbs, SCI Survivor - Mr. Stubbs currently works for the Mississippi Department of Rehabilitation Services as an Outreach Coordinator. A spinal cord injury survivor since 2003, he works with multiple organizations advocating for the advancement of Mississippians with disabilities by being a board member of APSE and the ARC. As a SCI survivor and advocate, he engages the public with disability awareness presentations and motivational speaking to relay his message and story of living with a spinal cord injury to help support families in similar situations.

Ms. Nicole Marquez, SCI Survivor - Ms. Marquez is a dancer/actress who dreamed of performing on Broadway. She is a graduate of the University of Southern Mississippi with a major in theater and a minor in dance. By 2007, she had saved her money to make the move to New York. For nearly nine months, she lived the fast, exciting lifestyle of auditions. While following her dreams, Nicole had an unfortunate accident. She has overcome many obstacles and her positive attitude has proven that “you can’t stop this dancer”.

Reverend Bruns Myers III, SCI Survivor—Reverend Myers has served as Chaplain/Ethicist at Mississippi Methodist Rehabilitation Center and is currently the Associate Priest at St. Philips Episcopal Church. A spinal cord injury survivor since 1970 as the result of a diving accident, he has served on the Boards of many disability related organizations. Reverend Myers enjoys promoting satisfying and active lifestyles for people with disabilities through motivational speaking and presentations.
Section 6: TBI/SCI WAIVER

MDRS received approval from The Centers for Medicare and Medicaid Services (CMS) in 2002 to implement the TBI/SCI Waiver. In 2008, the TBI/SCI Waiver was renewed for another five years. This home and community-based services program is operated in partnership with the Mississippi Division of Medicaid. The program utilizes matching dollars from the TBI/SCI Trust Fund to draw down federal dollars to extend services to individuals with traumatic brain and spinal cord injuries. Individuals enrolled in the TBI/SCI Waiver may receive attendant care, respite care, limited home modifications, medical equipment, and supplies and transition assistance services. All services are provided pursuant to an individualized plan of care. During Fiscal Year 2013, a total of 861 individuals received services through the TBI/SCI Waiver.

Pictured is TBI/SCI Waiver client Mercetia Parr. Ms. Parr was injured in a motor vehicle accident in December 2007. Although she was only in junior high school at the time, she was able to return to her regular classroom after a short period and graduated on time with the class of 2009 at Columbus High School with honors. She is currently a senior at MS University for Women with hopes of becoming an Occupational Therapist.

Section 7: DIRECT CLIENT SERVICES

7.1 Durable Medical Equipment and Supplies

Durable Medical Equipment and Supplies enable individuals to increase their ability to perform the activities of daily living, perceive, control, or communicate with the environment in which they live. Because of these services, their independence is greatly enhanced. An example of such services is specialized wheelchairs. There is a $35,000 lifetime cap for Durable Medical Equipment, Home Modifications and Vehicle Modifications combined when provided by the Trust Fund. A total of 411 consumers received Durable Medical Equipment and Supplies through the TBI/SCI Waiver and TBI/SCI Trust Fund combined.
7.2 **Home Modifications**

Many times an individual is restricted in his/her activities due to limited access to their environment. Home modifications enable the individual to function more independently in their home by making their home environment accessible. Examples of such services are: widening doorways and installing grab bars. A total of 84 consumers received Home Modifications through the TBI/SCI Waiver and TBI/SCI Trust Fund combined.

7.3 **Vehicle Modifications**

Vehicle Modifications are provided to accommodate specialized wheelchairs or other mobility devices. These services are also provided to enable the individuals to transport themselves or be transported in the community. Vehicle Modifications are a service component through the TBI/SCI Trust Fund but not the TBI/SCI Waiver. Thirty-nine consumers received Vehicle Modification services.

7.4 **Respite Services**

Respite Services gives short-term, temporary relief to the family caregiver because of the absence or need for relief of the caregiver. Respite helps reduce stress and maintain family relations by providing the caregiver with time to rest, relax and re-create. Payments are made for the following levels of care, based on a physician’s determination of need: (1) Companion, (2) Nurse Aide, (3) Licensed Practical Nurse, and (4) Registered Nurse. A total of 37 consumers received Respite Services through the TBI/SCI Waiver and the TBI/SCI Trust Fund combined.

7.5 **Personal Care Attendant Services**

Personal Care Attendant Services provide human assistance to individuals that enable them to accomplish tasks they would normally do for themselves if they did not have a disability. Personal Assistance may be in the form of hands-on assistance to assist with eating, bathing, dressing, personal hygiene, and transferring or assistance with cognitive activities such as planning daily schedules, grocery shopping, and banking. Transitional Personal Care Attendant Services are limited to 12 months. During this time, the survivor and family members will be assisted with seeking other attendant care services that can go beyond the 12-month limit such as attendant care services provided under the Waiver. A total of 904 consumers received Personal Care Attendant Services through the TBI/SCI Waiver and the TBI/SCI Trust Fund combined.
7.6 **Emergency Services**

Emergency Services are services provided to the individuals that are of a short-term, urgent nature and are considered critical for the individual’s survival, general health, and welfare. There is a $1,000 lifetime cap limitation per individual. Emergency Services are not a service component of the TBI/SCI Waiver but are a service component through the TBI/SCI Trust Fund. Four consumers received Emergency Services.

7.7 **Case Management**

Case Management involves assisting individuals in gaining access to needed services. Case Management may be used to locate, coordinate, and monitor necessary and appropriate services. Case Management also serves as providing necessary coordination of multiple services and/or Providers. Case Managers are involved in developing an individualized Plan of Care with the consumer. At a minimum, the Counselor maintains monthly contact and conducts quarterly face to face visits with the individual. A total of 861 individuals received case management services through the TBI/SCI Waiver.

7.8 **Transition Assistance Services**

Transition Assistance Services are services provided to a Mississippi Medicaid eligible nursing facility resident to assist in transitioning from the nursing facility into the Traumatic Brain Injury/Spinal Cord Injury Waiver Program. Transition Assistance is one-time initial expense required for setting up a household. The expenses must be included on the Plan of Care. Transition Assistance Services are capped at $800.00 one-time initial expense per lifetime. Transition Assistance Services are a service component through the TBI/SCI Waiver but are not a service component of the TBI/SCI Trust Fund. One consumer received Transition Assistance Services.

A total of 1197 individuals received services utilizing funding through the TBI/SCI Trust Fund and Waiver.
The following chart is an overview of the number of clients served, the types of services received and funds utilized through the TBI/SCI Trust Fund and the TBI/SCI Waiver for Fiscal Year 2013.

<table>
<thead>
<tr>
<th>Service Category</th>
<th>FY 2013 Expenditures ($)</th>
</tr>
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<tbody>
<tr>
<td>Attendant Care</td>
<td>15,325,438.39</td>
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<tr>
<td>Emergency</td>
<td>1,887.13</td>
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<tr>
<td>Equipment</td>
<td>655,526.74</td>
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<tr>
<td>Home Modifications</td>
<td>739,425.66</td>
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<tr>
<td>Respite</td>
<td>53,587.52</td>
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<td>Specialized Medical Supplies</td>
<td>91,002.51</td>
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<tr>
<td>Vehicle Modifications</td>
<td>330,584.29</td>
</tr>
<tr>
<td>Transition</td>
<td>490.00</td>
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<tr>
<td>Assistive Technology Services</td>
<td>107,211.46</td>
</tr>
<tr>
<td>Total Number of Clients Served</td>
<td>1197</td>
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<tr>
<td>Total Expenditures</td>
<td>17,305,153.70</td>
</tr>
</tbody>
</table>
Section 8: GRANT PROJECTS

8.1 Prevention and Education Projects

Mississippi has one of the highest incidence rates of traumatic brain injuries in the United States. However, most spinal cord and brain injuries are preventable. If Mississippians practiced better safety measures such as eliminating drunk driving, wearing motorcycle/bicycle helmets, and properly using safety belts/child restraints, the number of SCI and TBI injuries would be drastically reduced.

The TBI/SCI Trust Fund promotes prevention activities by annually funding projects that increase awareness and acceptance of safety practices. These campaigns may be targeted toward a specific activity (e.g., diving safety, seat belt usage, drinking and driving) or a particular age group (children, teens, etc.) or they may be more general in scope.

Projects may also be funded to promote awareness and education regarding SCI and TBI. Target groups could include any of the following: individuals with SCI and TBI; family members; employers; professionals such as educators, social workers, and health care providers; or the general public.

The following Prevention and Education Projects were funded for FY 2013, beginning July 1, 2012:

**Brain Injury Association of Mississippi (BIA) - “Mississippi Brain and Spinal Cord Injury Awareness, Education, Prevention and Support Program”**

The picture above is from an ATV safety course.

The picture below is from the BIA Bowl-A-Rama.
Memorial Hospital at Gulfport Foundation—“ATV Safety Event”

This event provided an ATV safety education talk, a safety T-shirt and a free ATV helmet to 250 participants.

Memorial Hospital at Gulfport Foundation—“Street Smart Robot and Cruiser”

Memorial Hospital sharing brain and spinal cord injury prevention messages through the use of Street Smart Robot and his cruiser.
2 B Lazy Farm – “Equine Awareness Safety Division”

The 2 B Lazy Farm promotes the awareness of the need to use equine safety equipment, such as helmets and breakaway stirrups, for all types of riding and for all age riders. This program promotes education and prevention regardless of experience from backyard enthusiast to show ring expert, for persons with traumatic brain injury and traumatic spinal cord injury.

Mississippi Safety Services -“Ollie the Otter”

More than 6000 children in Mississippi were introduced to Ollie the Otter and learned how the use of booster seats helps prevent traumatic brain injuries and spinal cord injuries.
I hereby pledge that:

• I promise to NEVER put myself, my passengers, or others in danger by texting while driving.

• I promise to keep my focus on the road while I drive and will encourage my friends and family to adopt the same safe practices.

• I promise to be a positive role model for all who ride with me.
The DRV NW-TXT L8R Campaign has been promoted at high school football games, college baseball games, teen conferences and disability related events. We have collected 5000 pledge cards since the campaign began.

This photo was taken while filming our commercial for the DRV NW– TXT L8R Campaign.
8.2 Transitional Living Projects

Transition from a medical setting to the home and community after a traumatic injury involves numerous changes and adjustments for the survivor and family members. The Trust Fund Program traditionally funds projects that assist with this reintegration. These projects will address activities such as increasing accommodating physical functioning; cognitive retraining; behavior modification; socialization; recreational activities; and adjustment to disability by the consumer and family members.

Methodist Rehabilitation Center – “MRC Transitional Living Services and Community Integration for Individuals with Traumatic Brain or Spinal Cord Injury Program - Quest”

This program used grant funds to purchase treatment in the outpatient program for TBI/SCI survivors who have no other funding source and who would otherwise not have access to transitional living and community integration services.
8.3 Recreation Projects

People with spinal cord and brain injuries may have physical limitations, but there is no limit to their desire for social and recreational activities. In an effort to expand opportunities for recreation, the following projects were funded for FY 2013 beginning July 1, 2012:

MACE—Metro Area Community Empowerment- “Rollin’ Tigers Recreational Services”
William Heard - “Our Artworks” Program

“Our Artworks” was developed as an organization to help individuals with disabilities discover the arts. It is a creative adult art program designed to bring out the creativity of individuals and build on self awareness and self confidence skills. Participants created paintings, drawings, photography and collages.

LIFE eheal – “Encouraging, Healthy Eating and Active Lifestyles”

A skills training program was developed that focused on good nutrition and exercise. It was designed to help maintain a healthy weight and active lifestyle.
Section 10: Annual Nursing Home Survey

The TBI/SCI Trust Fund legislation requires an annual survey of Mississippi nursing homes to identify all residents under the age of fifty-five who have traumatic spinal cord or brain injuries. Beginning June 2013, the Office of Special Disability Programs mailed out two hundred and forty-two (242) nursing home surveys. A total of one hundred and thirteen (113) survey forms were returned. Of those one hundred and thirteen (113) survey forms, seventy-six (76) nursing homes reported they had no individuals with traumatic brain injuries or spinal cord injuries. Based on the other thirty-seven (37) forms received, the nursing homes reported fifty (50) individuals with a traumatic brain injury and twenty-three (23) individuals with spinal cord injury. Two (2) individuals were referred to the appropriate programs from the results of this survey.
FY 2013 Traumatic Brain Injuries/Spinal Cord Injuries
The Impact of Injuries in our State
Traumatic Brain Injuries— 4786
Spinal Cord Injuries— 267

All Others Count
Pedestrian 147
GSW 105
Other Assault 90
Pedalcyclist 60
Other Cause - Specified 35
Stabbing 28
Other Suicides 15
Other Cause - Unspecified 13
Unknown 11
Machinery 5
Natural - Environmental 3
Fire/Burn 1
Inhalation 1
Total 514

Note: Struck by/Against includes Altercations/Fights, Hit by Flying Object or Blunt Instrument, Crush, Sports Injuries
Top Four Mortality Causes for Spinal Cord Injuries

- MV Traffic
- Falls
- Pedestrian
- Other Transport

Top Six Mortality Causes for Traumatic Brain Injuries

- MV Traffic
- Falls
- GSW
- Other Transport
- Pedestrian
- Struck by/Against

All Others

- Motorcycle
- Pedalcyclist
- Other Assault
- Unknown
- Other Suicides

Incidents by Age and Gender

Traumatic Brain

N = 4101

Incidents by Age and Gender

Spinal Cord

N = 288
Section 12: Other Activities

The TBI/SCI Trust Fund implemented the “Use Your BRAIN: Best Routine Against Injury Now” Helmet distribution program in February 2010. Over 30,000 helmets have been given to elementary students at schools and events across the State since the program began.

Hunter Safety:

Radio spots regarding hunter safety and tree stand safety were aired across the state.