Traumatic Brain Injury/ Spinal Cord Injury Trust Fund Program

ANNUAL REPORT - FY 2006

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OFFICE OF SPECIAL DISABILITY PROGRAMS



Providing the freedom to live



Dear Governor Barbour and Members of the Mississippi Legislature:

As the Executive Director of the Mississippi Department of Rehabilitation Services, I am proud to present the 2006 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.

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. We have remained committed to planning and developing effective programs and policies that improve access to health and other services for individuals with Traumatic Brain or Spinal Cord Injuries and their families. 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.

During FY 2007, we will continue to pursue all possible funding alternatives and resources to leverage the maximum draw down 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 remains committed to enhancing Trust Fund programs that are invaluable resources for individuals who have sustained a Traumatic Brain Injury or Spinal Cord Injury.

Sincerely,

H.S. McMillan, Executive Director Mississippi Department of Rehabilitation Services

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Section 1: VISION

In an effort to enable Mississippians with spinal cord injury and traumatic brain injury to 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: <u>ELIGIBILITY</u>

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) intercranial pressure or arterial monitoring.

For the purposes of this program, <u>traumatic brain injury</u> 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. <u>Spinal cord injury</u> 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 \$6.00 from all other moving vehicle violations. Beginning July 1, 2005, moving vehicle violations increased from \$4.00 to \$6.00.

Section 4: PROGRAM ADMINISTRATION

The Mississippi Department of Rehabilitation Services (MDRS) was designated by the Legislature to administer the Spinal Cord and Head 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, Jackson (**Professional in Clinical Rehabilitation Setting**) – Dr. Manning is on the staff of the University of Mississippi Medical Center - Department of Neurology. He has worked extensively in the area of neurobehavioral aspects of brain injury. He is active in the Brain Injury Association of Mississippi and is past president of the association.

Mr. Randy Shumpert, Survivor – Mr. Shumpert volunteers as a Peer Counselor with Independent Living. He also is a member of the Spirit Team with Mississippi Methodist Rehabilitation Center. Mr. Shumpert received a spinal cord injury in 1994 from a car accident. In 2001, Mr. Shumpert was the recipient of the Bennie Owens Award, which is presented to an individual with a disability who has advanced opportunities available to those with disabilities.

Dr. Howard Katz, Physiatrist, Brain Injury Specialist, Jackson (**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 facilitate their re-entry to the home and community.

Mr. Bradley Parker, Survivor (Designee of the MS Paralysis Association) –Mr. Parker is a Board Member of the Mississippi Paralysis Association and is Treasurer of the Central Mississippi Spinal Cord Injury Association. He is actively involved with the community as a Peer Support Counselor for spinal cord injury survivors. Mr. Parker sustained a cervical spinal cord injury in 1981 in a diving accident.

Dr. Hartmut Uschmann, Professor – Dr. Uschmann is on the staff of the University of Mississippi Medical Center - Department of Neurology.

Dr. Greg Little, Survivor – Dr. Little sustained a traumatic brain injury following an automobile accident at the age of 18. A year after being discharged from hospital care, he began his college studies. During that time he earned a BS in therapeutic recreation, M. Ed in special education and a Ph.D in adult education. Having retired from State employment, he currently serves as the associate administrator of Rolling Hills Development Center in Starkville.

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 a community college pursuing a degree in Criminal Justice. 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.

Ms. Terri Galloway, Family Member – Ms. Galloway's daughter, Jill, was injured in a car accident and sustained a traumatic brain injury. Ms. Galloway has worked tirelessly in an effort to bring awareness to the various needs of brain injury survivors and their families.

Ms. Beverly Gilmer, Family Member – Ms. Gilmer's son, Steve, was injured in a four-wheeler accident at the age of 17. Steve sustained a traumatic brain injury that has affected his hearing and resulted in severe headaches at times. Presently, Steve is currently enrolled at Hinds Jr. College pursuing a degree in Criminal Justice.

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 2005, the TBI/SCI Waiver was renewed for another three 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 2006, a total of 554 individuals received services through the TBI/SCI Waiver.



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 \$20,000 lifetime cap for Durable Medical Equipment, Home Modifications and Vehicle Modifications combined when provided by the Trust Fund. A total of 233 consumers received Durable Medical Equipment and Supplies through the TBI/SCI Waiver, and 150 consumers received services through the TBI/SCI Trust Fund.

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 34 consumers received Home Modifications through the TBI/SCI Waiver, and 18 consumers received Home Modifications through the TBI/SCI Trust Fund.

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. A total of 36 consumers received Vehicle Modifications through the TBI/SCI Trust Fund. Vehicle Modifications are not a service component of the TBI/SCI Waiver.

7.4 <u>Respite Services</u>

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 39 consumers received Respite Services through the TBI/SCI Trust Fund.

7.5 <u>Personal Care Attendant Services</u>

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 491 consumers received Personal Care Attendant Services through the TBI/SCI Waiver, and 106 consumers received Personal Care Attendant Services through the TB/SCI Trust Fund.

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. A total of 4 individuals received Emergency Services through the TBI/SCI Trust Fund.

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 written 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 600 individuals received case management services through the TBI/SCI Waiver.

<u>A total of 874 individuals received services utilizing funding through the TBI/SCI Trust</u> <u>Fund.</u>

The following chart is an overview of the number of clients served and the types of services received through the TBI/SCI Trust Fund and the TBI/SCI Waiver.



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 2006, beginning July 1, 2005:

Brain Injury Association of Mississippi -"Ride and Roll Program for Central MS School System"

The association provided educational conferences and workshops to increase public awareness and concerns of TBI/SCI survivors and families; operation of a statewide resource center and developed, produced and distributed TBI/SCI materials; and maintained a 24 hour toll free helpline.

The grant also implemented the Ride and Roll School Safety program to 5000 children in the Jackson School System and fit them with sports helmets. Met with parents prior to each safety fair to provide a presentation related to prevention of traumatic brain and spinal cord injuries.



Mississippi Safety Services- "Project Booster Seat"

Mississippi Safety Services educated approximately 2,200 children by offering safety programs to all certified day care centers in the three county area of Hinds, Madison, and Rankin. Approximately 265 children were fitted with booster seats or a convertible seat. Child passenger safety information was provided for patient education to about 100 physicians and health departments.

Bucklebear visits daycares and provides Safety information and explains the importance of seat belt protection.



<u>2 B Lazy Farm – "Equine Awareness Safety Division"</u>

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



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 project(s) 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 "THANKS Mississippi"

This self-care reinforcement program provides transitional living services to persons with spinal cord injury by extending communication between individuals with SCI and rehabilitation specialist.

Methodist Rehabilitation Center "MRC Brain Injury Community Integration Program -Quest"

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



8.3 <u>Recreation Projects</u>

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 was funded for FY 2006 beginning July 1, 2005.

YMCA I-55 Jackson, MS Branch – "Physiability Program"

Funds provided by the Trust Fund program were used to purchase a variety of equipment for TBI and SCI survivors.





Frank P. Phillips Memorial <u>YMCA, Columbus, MS</u> <u>"BRAINSTORM"</u>

This program provides a community therapeutic recreation program for adults eighteen or older who have experienced a traumatic brain injury.



University of Southern Mississippi Toy Library and Technology Learning Resource Center - "Fitness is Fun for All"

This program is available to people with TBI/SCI in South Mississippi. People with TBI/SCI will have an opportunity to access fitness and health club equipment and instruction at no cost to them and will provide the opportunity to connect with others and expand social contacts and opportunities for friendship. Recreational activities will also be available to people with TBI/SCI. However, the arrival of Hurricane Katrina dampened the progress being made as the saltwater ruined the equipment that was not washed away. Fortunately, with monetary donations, the library is in the process of restocking.



TBI/SCI Grants Awarded FY 2006

Section 9: Total Expenditures

The following chart shows the total expenditures for the TBI/SCI Trust Fund FY 2006. The expenditures are categorized by Direct Client Services, Grants and Registry, and Administrative Costs.



FY 2006 Total Expenditures - \$8,069,348.38

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 July 2006, the Office of Special Disability Programs mailed out one hundred and eighty-nine (189) nursing home surveys. A total of ninety-eight (98) survey forms were received. Of the ninety-eight (98) survey forms, thirty-four (34) referrals were received. Of those thirty-four (34) referrals, sixteen (16) were traumatic brain injury and spinal cord injury survivors. As of the report date, of those sixteen (16) referrals, eleven (11) remain open, and three (3) were closed. One (1) individual was successfully transitioned out of the nursing home and is receiving services under the TBI/SCI waiver and one (1) is in the process of being transitioned.

Section 11: SCI and TBI Registry

A surveillance system was established by the Mississippi State Department of Health in 1992 to determine the epidemiology of SCI and TBI among Mississippi residents. The information from this registry is used in developing and evaluating programs relating to SCI and TBI. The TBI/SCI Trust Fund Program has provided funding for this program since 1997.

As of the report date, the 2005 death rates have not been released from vital records. However, the TBI hospitalization incidence rate for Mississippi in 2004 was 109.2 per 100,000 with a death rate of 28.5 per 100,000.

The median age of persons reported as having a TBI is 30 years old. 48 % of TBI's occur among persons aged 15 to 44. Overall, 62% of all TBI's occurred among males as the risk of injury to men is two times as great as it is to women, which was 38%. Based on emergency medical services data, the most frequent cause of TBI continues to be motor vehicle crashes at 28%, followed by falls at 21%.

Mississippi's 2004 SCI incidence rate is nearly twice the national average with a rate of 6.3 per 100,000 individuals. In 2005, the median age of persons reported as having a Spinal Cord Injury was 48 years old. Over 59% of all SCI's occurred among males compared to 41% for females. The most frequent cause of SCI continues to be motor vehicle crashes which account for over 33% of all spinal cord injuries followed by injuries resulting from falls at 26%.