

Tennessee Statewide TBI Plan September 2018

Introduction

In Tennessee, approximately 7,000 people per year are reported to the TBI Registry with a traumatic brain injury-related hospitalization or death. Of that number, approximately 5,000 are Tennessee residents, the remaining number being residents of other states that are admitted to Tennessee hospitals. Traumatic brain injury is defined as an acquired injury to the brain caused by an external physical force resulting in total or partial disability or impairment. Persons with TBI may experience impairments that affect their physical, cognitive and behavioral functioning, which in turn impacts their ability to return to home, school and work. Whether the injury is the result of a fall, motor vehicle accident, assault or sports activity, these survivors and families may experience emotional and economic stress. The focus of the TBI Program is to improve services for persons with brain injury and their families.

In 1993, the Tennessee General Assembly established the Traumatic Brain Injury Program in the Department of Health in order that the special needs of persons with brain injury and their families could be addressed. The legislation defined several objectives for the TBI program which are used as the basis of the TBI state plan. The TBI Advisory Council began meeting in March, 1994; a TBI Needs and Resources Assessment served as the basis for short and long term program goals. The legislation calls for the establishment of a registry, a trust fund and describes a number of duties for the coordinator. Current program staff includes the Program Director (coordinator) and an Epidemiologist who oversees the registry.

The intention of the State Plan is to provide a framework for the development of a community based system of care that addresses the needs of persons with brain injury and their families.

Who is injured?

During the 2017 calendar year, a total of 7,402 TBI patients were reported to the TBI Registry. Of these, 6,680 presented with a nonfatal TBI-related hospitalization and 722 were deceased. Overall, 58% of TBI patients were males. The number of male TBI patients exceeded females in every age group except in patients aged 1-4 years and patients over 75 years. The gender difference varied within racial groups: 55% of white TBI patients were male compared to 69% of black TBI patients. Fifty-seven (57%) per cent of TBI patients reported to the Registry were adults over 54 years of age. Females ages 75 to 84 comprised the largest proportion of reported TBI patients.

What causes the injuries?

Since the Registry began collecting data in 1996, the leading causes of TBI in Tennessee have been accidental falls and motor vehicle accidents. Falls surpassed motor vehicle accidents as the most frequent cause of TBI in 2007, likely due to the increase of fall-related TBI in seniors. In 2017, accidental falls remained the leading cause of injury amongst patients reported to the Registry, accounting for 32% of patients.

Falls were the leading cause of TBI-related hospitalizations and deaths reported to the Registry in children under five and adults over the age of 64. However, motor vehicle traffic accidents accounted for 27% of Registry patients overall and were the leading cause of injury in patients ages 5 to 64. Among other causes of injuries were assault, struck by/against, self-harm, and other/unknown cause.

State Plan Based on Enabling Legislation

Section 1: Funding

Objective 1.1 **Aggressively seek and obtain funding, on an ongoing basis, from all available sources, including but not limited to Medicaid waivers and for expansion of the Medicaid program, private and federal funds needed to implement new state plans and services, and to expand and revise existing state plans and services for persons with traumatic brain injuries, including case management.**

Responsible Party: TDH
Funding: TBI trust fund
Provider: TDH, TBI Advisory Council
Status: ♦ Since 2000, the TDH-TBI program has been the recipient of federal grants from the Health Resources and Services Administration (HRSA) and the Administration on Community Living (ACL) that have focused on brain injury education and training.
♦ The enabling legislation directs that unused TBI revenues do not revert to the general fund but are rolled into the TBI trust fund and used to sustain the program.
♦ The TBI community continues to promote the idea of a TBI-specific Medicaid waiver which some states have implemented. TennCare has existing home and community- based waivers to serve the elderly and disabled for which survivors of brain injury may be eligible.
♦ There are currently eight brain injury Service Coordinators providing case management to persons with brain injury and their families in all 95 counties of the state.

Objective 1.2 **Seek funding, on an ongoing basis, and, in conjunction with other state agencies, prepare, coordinate, and advocate for state appropriations needed to fund and to develop services to implement the state plan.**

Responsible Party: TDH
Funding: TBI trust fund
Provider: TDH
Status: ♦ The TBI Program Director and the Advisory Council seek funding on an ongoing basis. The Council includes representatives from the other state departments that also serve persons with brain injury -- Education, Mental

Health and Substance Abuse Services, Human Services, and Intellectual and Developmental Disabilities – which enhances cooperation and collaboration.

Section 2: Advisory Council

Objective 2.1 Establish an advisory council to provide advice and guidance to the TBI coordinator in the development of the TBI program.

Responsible Party: TDH

Funding: TBI Trust Fund

Provider: TDH

Status: ♦ The nine-member Council is appointed by the Governor and includes representatives from the Departments of Education, Mental Health and Substance Abuse Services and Intellectual and Developmental Disabilities, and Human Services. An additional member represents health care professionals. The majority membership, five of the nine members, represent the category of TBI survivor, family member or primary caregiver.
♦The responsibility of the Advisory Council is to provide advice and guidance to the TBI coordinator in the development of the TBI program, to make recommendations and perform other duties as necessary to implement a comprehensive statewide TBI plan.
♦The Council was organized in 1994 and has met quarterly since that time.

Section 3: Case Management Services

Objective 3.1 Provide technical assistance and define gaps in service delivery and spearhead the development of those services needed for a comprehensive system of service delivery.

Responsible Party: TDH

Funding: TBI Trust Fund

Provider: TDH

Status: ♦The results of the TBI Needs Assessment identified gaps in service delivery for TBI survivors. The program's Request for Grant Proposal document listed these priority areas of need as those to be addressed in the development of home and community based services.
♦The TBI office provides technical assistance as requested by consumers, families, and providers. Examples include providing information on services and programs, referrals to rehabilitation programs and other types of facilities, and referrals to support groups.
♦The TBI office also conducts annual technical assistance site visits with all contractors.

Objective 3.2 Develop a coordinated case management system

Responsible Party: TDH

Funding: TBI Trust Fund

Provider: TDH, Brain Injury Association of Tennessee, Regional One Health, Chattanooga Area Brain Injury Association, Epilepsy Foundation, Crumley House, West Tennessee Rehabilitation Center, Fort Sanders Regional Medical Center

Status: ♦ The Service Coordination project began in 1996 and is designed to assist person with brain injury and their families. Each agency has established a Family Support Center in their respective area for the purpose of providing the following services for children and adults with traumatic brain injury: providing information; making referrals to services and agencies; assisting consumers in applying for and accessing services; advocacy; support group development; and the development of new programs and activities.

♦ Currently there are eight service coordinators covering all 95 counties in the state.

Section 4: Information / Resources

Objective 4.1 Compile a comprehensive directory of available programs and services

Responsible Party: TDH
Funding: TBI trust fund
Provider: TDH
Status: ♦ A comprehensive resource directory, *Traumatic Brain Injury Services Directory and Resource Information Guide* was developed in 1995 and is updated each year. The directory is distributed to health care facilities and TBI professionals across the state.

Objective 4.2 Serve as a clearinghouse for the collection and dissemination of information collected on available programs and services.

Responsible Party: TDH
Funding: TBI Trust Fund
Provider: TDH
Status: ♦ The TBI clearinghouse which is accessible via a toll-free number has been operational since 1994. Information is routinely updated on available programs and services across the state. A TBI Program brochure has been broadly distributed. The Program also has a web page on the Department of Health website.

Section 5: Education

Objective 5.1 Identify and address training needs for all persons serving TBI clients.

Responsible Party: TDH, Tennessee Disability Coalition
Funding: ACL federal grant, TDH
Provider: TDH, Tennessee Disability Coalition

Status: ♦ The federal TBI grant awarded in June 2018 focuses on TBI workforce development. Staff are identifying disciplines to target and relevant training needs.

Objective 5.2 Educate the general public concerning the need for head injury prevention programs and the need for early intervention

Responsible Party: TDH

Funding: TBI Trust Fund

Provider: TDH

Status: ♦ The TBI Program collaborates with the Brain Injury Association of Tennessee to present an annual conference focusing on current topics, including prevention and the need for early intervention.
♦ The TBI Service Coordinators provide prevention programs in their respective service areas.
♦ The TBI Program Director regularly provides educational presentations on brain injury to the Commissioner's Council on Injury Prevention.

Objective 5.3 Improve the knowledge and skills of the TBI workforce in Tennessee

Responsible Party: TDH, Tennessee Disability Coalition

Funding: ACL TBI grant, TDH

Provider: Brain Links

Status: In June 2018, the TDH TBI Program was awarded a new three-year grant by the Administration for Community Living to focus on educating the workforce that serves persons with brain injury across the lifespan.

Section 6: Home and Community Based Services

Objective 6.1 Develop affordable and accessible home and community based services

Responsible Party: TDH

Funding: TBI Trust Fund

Provider: TDH

Status: The program is authorized to award grants to non-profit agencies and governmental entities. TBI grants provide home and community based services for persons with brain injury and their families. Currently grants fund the eight Service Coordinators, TBI camp, and personal care supports in housing facilities in East and West Tennessee. The TBI Family Support program provides direct financial assistance to persons with brain injury.

Objective 6.2 Conduct camp sessions for children and adults with TBI

Responsible Party: Easter Seals TN

Funding: TBI trust fund

Provider: Easter Seals

Status: The TBI program collaborates with the Easter Seal program to offer recreational camps for adults and youth with brain injury. Sessions include weekend and weeklong camps.

Section 7: Data Collection

Objective 7.1 Create a uniform state registry to report the incidence, prevalence and severity of TBI

Responsible Party: TDH
Funding: TBI trust fund
Provider: TDH
Status: Hospitals are mandated to provide information to the health department. Data is available starting from the first quarter of 1996. An epidemiologist oversees the registry and provides regular reports.

Section 8: Collaboration

Objective 8.1 Collaborate with other community and state agencies to increase the services available to brain injury survivors

Responsible Party: TDH
Funding: TDH, Brain Injury Association of Tennessee (BIAT), Tennessee Disability Coalition, Tennessee Department of Human Services
Provider: BIAT, Tennessee Disability Coalition, Commissioners Council on Injury Prevention
Status: ♦The Traumatic Brain Injury Program collaborates with the Brain Injury Association of Tennessee to organize a statewide annual conference.
♦The TBI Program works with Brain Links to increase knowledge of TBI in the workforce.
♦The TBI Program is a member of the Commissioners Council on Injury Prevention which is working on a statewide plan to prevent injuries, including TBI.
♦The TBI Program organizes an annual retreat for service coordinators to collaborate efforts to better serve TBI survivors.
♦The TBI Program funds the Executive Director position at BIAT and provides funding for local TBI support groups.
♦The TBI Program partners with the Tennessee Disability Coalition whose mission is to advocate for improved services for all person with disabilities.

Acronyms

BIAT –Brain Injury Association of Tennessee
CABIA – Chattanooga Area Brain Injury Association
DMHDD – Department of Mental Health and Developmental Disabilities
DOE – Department of Education
HRSA – Health Resources and Services Administration

TDH – Tennessee Department of Health
TBI – Traumatic Brain Injury