



Tennessee Department of Health

# Traumatic Brain Injury Program Annual Report

July 2015 – June 2016



## **Traumatic Brain Injury Program 2015-2016 Annual Report EXECUTIVE SUMMARY**

In 1993, the Tennessee General Assembly passed legislation establishing the Traumatic Brain Injury (TBI) Program in the Department of Health. The TBI Program staff, with guidance from a nine-member, governor-appointed Advisory Council is charged with expanding and revising existing state plans and services for persons with traumatic brain injuries. The program has achieved many accomplishments since its inception. This report contains specific information concerning the progress made from July 2015 through June 2016 in each of the major components of the Traumatic Brain Injury Program.

In Tennessee, approximately 8,000 people per year are injured and admitted to the hospital with traumatic brain injury. Around 6,000 of those injured are Tennessee residents, contributing to a rate of 79 traumatic brain injuries per 100,000 Tennesseans. TBI survivors can 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 car crash, a fall, an assault or sports activity there can be an economic and emotional toll on the survivor and the family. The focus of the TBI Program is to improve services available to survivors of TBI and their families.

### **Traumatic Brain Injury Advisory Council**

The nine-member governor appointed Advisory Council has met quarterly since 1994. The Council is composed of individuals dedicated to improving the lives of TBI survivors across Tennessee. Their guidance and recommendations have been invaluable to the development of the TBI program.

### **Federal Grant**

Beginning in 2000, the Traumatic Brain Injury Program was awarded a grant from the U.S. Health Resources and Services Administration (HRSA). The TBI Program used the funding to develop an education and training program for school personnel. Titled Project BRAIN, the overall goal of the grant project is to improve educational outcomes for children with brain injuries in Tennessee. Since the original grant award in 2000, the TBI Program has received a total of \$2,841,000 in federal funding, and \$1,000,000 from the Department of Education for matching funds.

### **Case Management**

Service Coordinators are established in eight locations and cover all 95 counties, providing case management services to TBI survivors and their families. Services for children and adults include: providing information; making referrals to services and agencies; assisting consumers in applying for and accessing services; advocacy; support group development; and developing new programs and activities. The role of the service coordinator is to assess an individual survivor and to coordinate available resources within the community. The eight service coordinators are serving an average case load of sixty-one survivors. During FY16, the service coordinators collectively provided information on TBI to over 11,000 callers.

### **Directory of Program and Services**

A comprehensive resource directory, *Traumatic Brain Injury Services Directory and Resource Information Guide* has been distributed statewide to health care facilities and TBI professionals and has served to increase awareness of the TBI program. The directory is also available on the program web site: <http://tn.gov/health/topic/tbi>.

### **Traumatic Brain Injury Registry**

Hospitals are mandated to provide information to the department and all are in compliance. Data is available starting from the first quarter of 1996. Analysis of the data allows staff to determine where and how injuries are occurring, what age groups are affected, and what prevention programs may be needed. During 2015, the number of persons in Tennessee admitted to the hospital with at least one brain injury diagnostic code was 7,214. All Tennessee residents listed on the registry receive a letter and program brochure to inform them of the services available through the TBI program.

### **Clearinghouse**

The TBI clearinghouse, with a toll-free 800 number, has been operational since 1994. Information is routinely updated on available programs and services across the state. A TBI brochure has been broadly distributed. The program has a web page on the department website: <http://tn.gov/health/topic/tbi>.

### **Education and Prevention**

The TBI program collaborates each year with the Brain Injury Association of Tennessee to present an annual statewide conference. The TBI Coordinator also participates on the Injury Control and Prevention committee which is currently developing a state plan for fall prevention.

### **Traumatic Brain Injury trust fund**

The fund has been established by the Department's Bureau of Administrative Services and revenues have been deposited into the fund as they have been received.

### **Grant Program**

The TBI Program is authorized to award grants for home and community based programs to address the needs of TBI survivors in Tennessee. The majority of the program revenues of \$1 million are allocated for grants. In FY16, services provided through grants included:

- The eight TBI service coordinators served an average case load of 61 survivors, assisting them with accessing local resources and programs. They collectively made 76 educational presentations to a total of 2,639 persons. The service coordinators also provided 39 exhibits on brain injury that were seen by 12,469 participants.
- The three Project BRAIN Resource Specialists provided 23 trainings to 830 school and health professionals. BRAIN staff also provided nine concussion trainings to 489 participants.
- Supportive living services were available to nine survivors living in two affordable and accessible apartment facilities in Memphis. In addition, personal care services were available to 14 residents of Crumley House Brain Injury Rehab Center.
- 59 adult and youth survivors of brain injury attended camp sessions.
- Project BRAIN transition liaisons are located in three children's hospitals and provided 14 trainings to 50 healthcare professionals. They assisted over 1,500 families in their transition from hospital to home to school.

### **Youth Sport-Related Injuries**

In April 2013, the Tennessee General Assembly passed legislation aimed at reducing youth sports concussion and increasing awareness of traumatic brain injury. The required educational materials are free of charge and available on the Tennessee Department of Health website: <http://tn.gov/health/article/tbi-concussion>.

### **Conclusion**

Although much has been accomplished, injuries persist. Work must continue to address the needs of all survivors in the state. The TBI Advisory Council extends their gratitude to the General Assembly for the opportunity to improve the lives of TBI survivors statewide.

**Tennessee Department of Health  
Traumatic Brain Injury Program  
ANNUAL REPORT  
July 2015 – June 2016**

In 1993, in response to testimony presented by TBI survivors from across the state, the Tennessee General Assembly established the Traumatic Brain Injury Program in the Department of Health to address the special needs of survivors of brain injuries and their families.

In Tennessee, approximately 8,000 people per year are injured and admitted to the hospital with traumatic brain injury. Around 6,000 of those injured are Tennessee residents, contributing to a rate of 79 traumatic brain injuries per 100,000 Tennesseans. An additional 54,380 emergency department visits were related to a TBI during 2014. Survivors can 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 car crash, a fall, assault, or sports activity there can be an economic and emotional toll on the survivor and the family. The focus of the TBI Program is to improve services available to survivors of TBI and their families.

This report contains specific information concerning progress made from July 2015 through June 2016 in each of the major components of the TBI Program as well as pertinent historical information. The TBI Program is part of the Injury Control and Prevention section of the Department of Health's Family Health and Wellness division. Current staff consists of a Program Director and an Epidemiologist that oversees the TBI Registry.

The enabling legislation calls for the establishment of a state TBI Registry, a TBI trust fund and a number of duties for the Coordinator. Each of these areas is addressed by first citing the Tennessee Code Annotated (T.C.A.) followed by a description of activities and progress.

**T.C.A. 68-55-102 & 103. Advisory Council established – Duties:**

The TBI Advisory Council was organized in accordance with the legislation to provide advice and guidance to the TBI program staff. The nine-member council is appointed by the Governor and includes representatives from the Departments of Education, Mental Health and Substance Abuse Services, Human Services and Intellectual and Developmental Disabilities. An additional member represents the Tennessee Hospital Association. Five of the nine members represent the category of TBI survivor, family member or primary care giver. The Advisory Council was organized in 1994 and has meets quarterly.

During 2015-2016, the TBI Advisory Council was comprised of the following members:

- Avis Easley, Chair, Departments of Mental Health/Intellectual Disabilities
- Lana Bennett, Survivor
- Alicia Fitts, Family member
- Alison Gauld, Department of Education
- Mark Heydt, Tennessee Hospital Association
- Rhonda Hicks, Primary Care Giver
- JoAnne Morris, Department of Human Services
- Brian Potter, Primary Care Giver
- Michelle Stanton, Survivor and Primary Care Giver



**TBI ADVISORY COUNCIL MEMBERS**

The duties of the Advisory Council are to advise the TBI coordinator, make recommendations and perform other duties as necessary for the implementation of a state-wide plan to assist TBI persons and their families. The Advisory Council is composed of individuals dedicated to improving the lives of TBI survivors in Tennessee. Their advice and recommendations have been invaluable to the development of the TBI program. The TBI Advisory Council is currently investigating options to utilize available resources in the TBI trust fund for the benefit of TBI survivors.

**T.C.A. 68-55-201. TBI Coordinator to be designated. The commissioner shall create a full-time position within the department and designate a person as the TBI coordinator to supervise and coordinate the development, implementation and enhancement of a registry and services system for persons with TBIs and provide sufficient staff to accomplish the effect and intent of this chapter. The TBI coordinator shall, to the fullest extent possible, utilize the services of the advisory council in fulfilling the duties and responsibilities required by this chapter.**

The TBI Registry was established in 1994 and the current full-time TBI coordinator (program director) has been supervising and directing the program as described in this report since its inception. Staff includes the program director and the epidemiologist that oversees the registry. The program director consults with Advisory Council members quarterly to secure their advice and guidance.

**T.C.A. 68-55-202. Duties. – (a) The TBI coordinator shall:**

**(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;**

The TBI Coordinator continuously seeks additional funding from all available sources.

**Medicaid Waiver:** The TBI community continues to promote the idea of a TBI specific Medicaid waiver. The administration has indicated that TBI survivors may be eligible to participate in existing waivers for the elderly and disabled or through the TennCare Choices program.

**Federal Grant award:** Since 2000, the Traumatic Brain Injury Program has been the recipient of a grant from the U.S. Health Resources and Services Administration (HRSA). In 2015, responsibility for the TBI federal grant moved from HRSA to the Administration for Community Living (ACL). The original three-year grant's focus is the provision of education and training for educators, families and health professionals who support students with TBI. The grant project, Project BRAIN, has the overall goal of improving educational outcomes for children with brain injuries in Tennessee. In June 2014, the TBI Program was awarded a new four-year grant in the amount of \$250,000 per year to continue and expand the work of Project BRAIN. Since the original grant award in 2000, the TBI Program has received a total of \$2,841,000 in federal funding, and 1,000,000 from the Department of Education in matching funds.





**PROJECT BRAIN STAFF**

**Expansion of services:** The expansion of services for TBI survivors is accomplished through the grants program as outlined in Section 68-55-402 below. Program staff collaborates with the Tennessee Disability Coalition, the Brain injury Association of Tennessee, the Epilepsy Foundation, and other relevant agencies to improve services for all persons with disabilities in the state.

Project BRAIN has expanded their services by funding a transition liaison program in three children's hospitals across the state. The Brain Injury Transition Liaisons (BITLs) work in Monroe Carell Jr. Children's Hospital at Vanderbilt in Nashville, Le Bonheur Children's Hospital in Memphis and Children's Hospital at Erlanger in Chattanooga.

A BITL follows up with families after they leave the hospital emergency department if their child has been treated for TBI. When families consent to receive follow up calls, they also potentially receive support from the Department of Education. During FY15, the BITLs served over 1,500 families.



**ERLANGER BITL TRAINING HOSPITAL STAFF**

**Case management:** There are currently eight service coordinators assisting TBI survivors and their families in all 95 counties through contract arrangements with various non-profit agencies. Each agency has established a Brain Injury Support Center in their respective area for the purpose of providing service coordination for children and adults with TBI. These services include: providing information; referring consumers to appropriate services and agencies; assisting consumers in applying for and accessing services; advocacy; support group development; and the development of new programs and activities.

The role of the service coordinator is to work with the individual survivor to assess needs and to collaborate and coordinate resources within the community on behalf of the client. The eight service coordinators are serving an average case load of 64 survivors and their families. During FY16, the service coordinators collectively provided information to over 11,000 callers.



**TBI SERVICE COORDINATORS**

The TBI service coordinators and the Project BRAIN staff work closely to serve survivors and families. In October 2015, the TBI service coordinators and the Project BRAIN staff attended a training retreat to provide them the opportunity to share resources, participate in team building and to discuss issues of common ground.

### *Success Story*

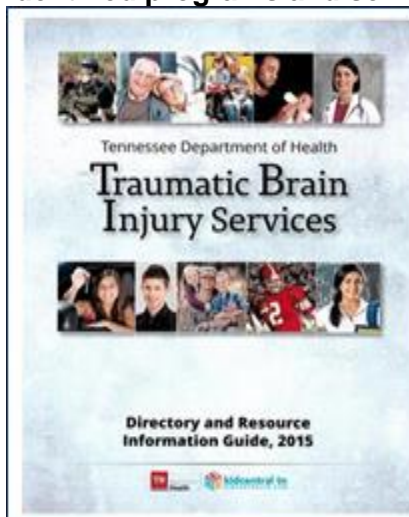
*A gentleman who received a registry letter called his local TBI service coordinator and said he had been unemployed and sitting at home after his injury. The service coordinator advocated for him at Voc Rehab and was able to get him accepted to the TBI program at the Tennessee Rehab Center in Smyrna. The man graduated after seven months and today has a good job in the construction business.*

### **Coordinator duties (continued):**

**(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:**

The TBI Program Director and the Advisory Council seek funding on an ongoing basis. The Advisory Council, which 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 - provides an opportunity for cooperation and collaboration. The Department of Education is a long-term Project BRAIN partner, promoting the program to schools and providing substantial financial support.

**(3) Identify available programs and services and compile a comprehensive directory of identified programs and services:**



A comprehensive resource directory, *Traumatic Brain Injury Services Directory and Resource Information Guide, 2015* has been distributed statewide to health care facilities and TBI professionals and serves to increase awareness of the TBI program. The directory is also available on the program web site: <http://tn.gov/health/topic/tbi> In addition, all the TBI service coordinators develop resource files for their local service areas.

**(4) Provide technical assistance and define gaps in service delivery and spearhead the development of those services needed for a comprehensive system of service delivery;**

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 making connections to support groups. The TBI office conducts annual technical assistance site visits with all TBI contractors.

The service coordination project described above [TCA 68-55-202 (a) (1)] is designed to assist survivors and their families overcome the gaps in services in their communities.

**(5) Implement, oversee and receive surveillance data from the Tennessee Brain Trauma Registry to use in developing and revising the state plan to meet the changing needs of this population:**

The TBI Registry data is a valuable tool in documenting the needs for TBI services and program planning. Data from the registry has allowed for successful application of the most recent federal grant award, Project BRAIN. According to the registry, in 2012, there were 1,071 children and youth ages 3-21 in Tennessee admitted to the hospital as a result of a TBI. That same year, the Department of Education classified 307 students in the TBI category. The number of children discrepancy identified through the TBI Registry compared to the number of children classified by DOE, indicated a need for correct identification of students with TBI. Project BRAIN is designed to address that specific need.

Registry data on sports concussions highlighted a problem in the state. As a result, Tennessee became the 44th state to pass a law related to sports concussions and is designed to reduce youth concussions and increase awareness of traumatic brain injury.

The TBI coordinator serves on the Department's Council on Injury Prevention and Control which is funded by a CDC grant. The TBI Registry data is one of the sources being used to identify areas of need.

**(6) Evaluate surveillance data regarding the quality of services provided and outcome and impact on the quality of life of this population, including reintegration and productivity in the community;**

As noted in TCA 68-55-202(a) (5) above, surveillance data is limited. The type of information being collected through the registry does not include the quality of services provided. The TBI program at the Tennessee Rehabilitation Center provides reports on the outcome and impact of the quality of life of this population, particularly in community reintegration and productivity.

**(7) Promote research on the causes, effects, prevention, treatment and rehabilitation of head trauma injuries;**

The development of the state registry and the resulting availability of statistics are directed toward encouraging research on the causes, effects and treatment of brain trauma injuries. The collection of all types of information on TBI through the clearinghouse will further identify areas for research development. Education and injury prevention activities for health care providers and the public, provide baseline data for pursuing further investigations.



**SERVICE COORDINATOR PREVENTION EXHIBIT**



**(8) Serve as a clearinghouse for the collection and dissemination of information collected on available programs and services. A statewide, toll-free telephone line shall be established and operated during normal business hours for the express purpose of providing such information to callers.**

The TBI clearinghouse, with a toll-free 800 number, has been operational since 1994. Information available includes: service coordination, rehabilitation facilities, day programs, respite care, transportation and financial issues. To publicize the clearinghouse, a TBI program brochure has been broadly distributed. The program has a web page on the department website: <http://tn.gov/health/topic/tbi>.

**(b) Utilizing the services and expertise of the advisory council to the greatest extent possible and in cooperation with the advisory council, the TBI coordinator shall:**

**(1) Develop a coordinated case management system, a short-term state plan, a long-term state plan, affordable and accessible home and community based services, and criteria to identify training needs and priorities for all persons serving TBI clients;**

The case management system known as service coordination and described in TCA 68-55-202 (a) (1) covers all 95 counties in the state. The Advisory Council and TBI coordinator have developed short term and long term goals and objectives for the program following the outline of the legislation. Efforts to provide affordable and accessible home and community-based services are on-going through TennCare Choices program. Currently, the TBI program is providing personal care services on a limited basis through a contract arrangement in select facilities in Memphis and Johnson City. Training needs of persons serving TBI clients are identified and addressed at the annual statewide conference.

**(2) Establish and provide for the centralized organization of a statewide family clearinghouse of information, including availability of services, education and referral to survivors, professionals, and family members during the early stages of injury in the acute hospital setting.**

Through the development of the TBI Resource Directory and the TBI Registry, contacts have been made in hospitals where acute care is provided. The service coordinators have developed referral relationships with their local hospitals. Copies of the updated directory are distributed to facilities statewide and awareness of the TBI Clearinghouse continues to increase. Through the improved reporting system to the registry, letters are being sent to survivors and service coordinators across the state are able to provide information and assistance more readily to survivors and their family members in the early stages of injury and throughout the survivor's lifespan.

**(3) Assure statewide compliance with licensure, if any, and performance standards through regular service monitoring, site visitation, and self-appraisal; (4) If licensure is required, monitor and update licensure requirements specific to this population;**

The Department of Health oversees certification and licensure of health care facilities in Tennessee. The TBI program coordinator works with appropriate staff to ensure licensure compliance and to monitor and update licensure requirements specific to this population as needed.

**(5) Seek funding and other resources to assure that state personnel working with this disability group are properly trained and provided, at least annually, an opportunity to**

**attend formal or informal education programs through colleges, workshops, seminars, or conferences;**



**FAMILY DAY CONFERENCE 2016**

The TBI program collaborates with the Brain Injury Association of Tennessee to plan and present an annual statewide conference. The plan for the 2016 Brain Injury Conference was to take a different approach from the usual one-day conference and have two half-day training sessions; one for survivors and families and a second for professionals. Co-sponsored by the Epilepsy Foundation of Middle & West Tennessee, the agenda for the Family Day included a keynote speaker addressing caregiver issues. Other sessions featured first aid for seizures, interacting with law enforcement and a panel on survivor and family issues. The Family Day conference for

survivors and family was a great success. The professional conference, presented in collaboration with Pi Beta Phi Rehab at Vanderbilt Bill Wilkerson Center, focused on continuum of care for TBI pediatric survivors from trauma through rehab. Each half-day session attracted approximately 90 participants. The two day event was offered at no cost for families and professionals.

The TBI staff and service coordinators, as well as the Project BRAIN staff, regularly present at seminars and workshops, enhancing the ability of state personnel to meet the needs of survivors. During FY16, the TBI service coordinators collectively made 76 educational presentations to a total of 2,639 persons. They also provided 39 exhibits on brain injury that were seen by 12,469 participants.

**(6) Ensure updates and compliance standards from the National Head Injury Foundation's quality standards committee are made available to professionals and providers, on a timely basis, to help educate providers and professionals regarding the latest technology available to this disability group;**

In addition to regularly scheduled trainings and the annual conference, the TBI program has developed a TBI Community Listserv to provide information on the latest technology available for the TBI community.

**(7) Oversee efforts to better educate the general public concerning the need for head injury prevention programs and the need for early intervention, including but not limited to, developing plans and programs for affordable post-acute rehabilitation services, long-term care programs, respite services, and day treatment programs to deal with those who have lifelong disabilities, as well as developing plans and programs to deal effectively with TBI students in the educational system;**

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. In addition, the TBI service coordinators provide prevention programs in their respective service areas. Project BRAIN, our federal grant project, is a program designed specifically to deal effectively with TBI students in the educational system.

Information on post-acute rehabilitation services, respite services, and day programs are included in the TBI clearinghouse and the TBI Resource Directory.



**PROJECT BRAIN AT KIDS CENTRAL EVENT**



**PROJECT BRAIN STAFF AT CONFERENCE**

Project BRAIN seeks to link hospital and community health providers with school professionals for identifying and addressing the needs of students with brain injuries. A specially designed TBI curriculum, *Brain Injury 101*, is used to train educators, health professionals and families. Project BRAIN provides training in any school system in the state upon request.

**(8) Work with vocational rehabilitation and other state agencies to offer incentives and to obtain cooperation of private industries to initiate on-the-job training and supported employment for TBI persons;**

The TBI staff maintains a close working relationship with Vocational Rehabilitation counselors and the TBI program at the Tennessee Rehabilitation Center in Smyrna. The comprehensive program there provides job skill training and placement for approximately 45 students a year. The Vocational Rehabilitation TBI program staff work with VR counselors located throughout the state. This helps promote incentives and obtain cooperation of private industry to initiate on-the-job training and support employment opportunities for persons with traumatic brain injury. TBI staff is available to provide technical assistance as requested.

**(9) Assist in obtaining grant funding and provide technical assistance for the Tennessee Head Injury Association (THIA) to develop policies and procedures to maximize self-determination and self-advocacy of a person suffering a TBI.**

The TBI program has an excellent working relationship with the staff and board of the Brain Injury Association of Tennessee (BIAT, formerly THIA). In FY16, the TBI program continued to support BIAT's work with survivors and their families. A grant from the TBI program funded a part-time executive director who acts as an advocate to improve funding for services benefiting TBI survivors. In addition, the Nashville Area service coordinator is housed at BIAT. Having a service coordinator at the BIAT office allows direct connection for callers and results in survivors receiving services more efficiently.

The TBI service coordinators facilitate brain injury support groups across the state. These monthly meetings provide a way to meet educational, social and emotional needs of survivors and families.

**T.C.A. 68-55-203. Brain Trauma Registry -- The commissioner shall establish and maintain a central registry of persons who sustain traumatic brain injury. The purpose of the registry is to: (1) collect information to facilitate the development of injury prevention, treatment and rehabilitation programs; and (2) ensure the provision to persons with traumatic brain injury of information regarding appropriate public or private agencies that provide rehabilitation services so that injured person may obtain needed services to alleviate injuries and avoid secondary problems.**

The TBI Registry is supported by an Epidemiologist housed in the Family Health and Wellness division. In 1996, data collection officially began with patients discharged. Reporting hospitals complete a questionnaire for inpatients with TBI-specific ICD-9 or, as of October 2015, ICD-10 diagnosis codes whose admission and discharge dates are different and for those individuals who died. Hospitals are required to report within six weeks of the end of the quarter.

Patients seen in emergency rooms who were sent home the same day are not required to be reported to the registry. All hospitals in the state are currently in compliance with this legislation although some do not report on time. The data enables staff to pinpoint the population being affected by brain injury and are used for injury prevention and health care planning. [See also TCA 68-55-202(a) (5)]



**TBI REGISTRY EPIDEMIOLOGIST**

All Tennessee residents listed on the registry receive a letter and program brochure to inform them of the services available through the TBI program. In FY16, 5,174 letters were mailed. For many, the letter is the first link to information regarding needed rehabilitation services and programs. According to 2015 final data, the number of persons in Tennessee admitted to the hospital with at least one head injury diagnostic code was 7,214. Accidental falls were the leading cause at 52%. A summary of registry data for 2015 is included as Attachment 1.

**T.C.A. 68-55-401. Traumatic Brain Injury fund. -- There is hereby established a general fund reserve to be allocated by the General Appropriations Act which shall be known as the "traumatic brain injury fund" hereafter referred to as the fund. Money from the fund may be expended to fund the registry, the TBI coordinator position, and additional staff requirements and other expenditures and grants under the provisions of this chapter.**

The fund is housed under the Department of Health and revenues are deposited into the as received. The fund balance as of June 30, 2015 was \$1,208,323.78. Funds are used



appropriately to cover staff positions and to provide grant funding. The TBI Advisory Council is currently investigating additional options to utilize available resources to benefit TBI survivors.

**T.C.A. 68-55-402. Grant Programs. -- From the revenues deposited in the traumatic brain injury fund, the Department of Health is authorized to provide grants to county and municipal governments and/or not for profit organizations for home and community based programs to serve the needs of TBI persons and their families. The department is authorized to establish such grant programs and to develop criteria for eligible applicants.**

In accordance with the legislation, the TBI program has awarded numerous grants for a variety of projects since 1995. Examples include:

- Crumley House Brain Injury Rehabilitation Program in Johnson City expanded their day program to provide recreation, transportation and respite care to TBI survivors and their families.
- In Memphis and Nashville, Mid-South Head Injury Association in Memphis and Brain Injury Association of Tennessee used grant funds to develop a comprehensive proposal to build affordable, accessible, and supportive housing for 48 TBI survivors using HUD Section 811 grant dollars.
- The Division of Rehabilitation Services Tennessee Rehabilitation Center in Smyrna created a specialized rehabilitation program for TBI persons.
- The Tennessee Emergency Services for Children Project received funds to improve the capability of 54 rural hospitals in the early management of acutely injured children.
- Centerstone Community Mental Health Centers, Inc. provided intensive in-home counseling and behavioral intervention for TBI students in 24 counties of middle Tennessee.

#### **Success Story**

*A brain injury survivor had had poor dental care which made it difficult to find work. The service coordinator connected her to a local dental clinic and also managed to find additional funds to pay for dentures through a women's group at a local church. Currently the woman is working at McDonald's, where she has been employed for the last five years.*

As a part of the FY16 contract renewal process, department staff and TBI program staff were instructed that contracts would be awarded on a competitive basis. As stewards of state funds, the state must make every effort to ensure that interested organizations and agencies are afforded the opportunity to be contractors for the state. To that end, a Request for Grant Proposal (RFGP) was issued for services for TBI survivors.

In FY16, grant awards provided the following services:

- Meritan provided personal care services for individuals with TBI who live in two accessible, affordable apartment buildings in Memphis.
- Crumley House Brain Injury Rehab Center offered respite and personal care assistance to TBI survivors.
- Easter Seals Tennessee provided camp and recreational opportunities for adults and youth with TBI.
- The Brain Injury Association of Tennessee employed a part-time executive director.
- The Tennessee Disability Coalition managed and implemented the HRSA/ACL grant that funds Project BRAIN.
- Grants for service coordination were awarded to:
  - Fort Sanders Regional Medical Center

- Brain Injury Association of Tennessee
- Regional One Health in Memphis
- Epilepsy Foundation of Middle Tennessee
- Crumley House Brain Injury Rehab Center
- Chattanooga Area Brain Injury Association
- Jackson Madison County General Hospital District

**Part 5 Youth Sport-Related Injuries [Effective January 1, 2014.]**  
**T.C.A. § 68-55-501 to 503 (2013)**

In April 2013, Tennessee became the 44<sup>th</sup> state to pass legislation aimed at reducing youth sports concussion and increasing awareness of traumatic brain injury. Both public and private school sports and recreational leagues for children under 18 that require a fee are affected by the new law. The law covers all sports. The TBI program staff led the effort to convene an interdisciplinary team of experts to review materials and make recommendations. The required educational materials are free of charge and readily available from the Tennessee Department of Health website: <http://health.tn.gov/TBI/concussion.htm>.

**Conclusion**

The TBI program is authorized to award grants for home and community based programs to address the needs of TBI survivors in Tennessee. The majority of the programs \$1 million revenues are allocated for grants. In FY16, services provided through grants included:

- The eight TBI service coordinators served an average case load of 61 survivors, assisting them with accessing local resources and programs.
- The TBI service coordinators collectively made 76 educational presentations to a total of 2,639 persons. They also provided 39 exhibits on brain injury that were seen by 12,469 participants.
- The three Project BRAIN resource specialists provided 23 trainings to 830 school and health professionals. Project BRAIN staff also provided nine concussion trainings to 489 participants.
- Supportive living services were available to nine survivors living in two affordable and accessible apartment facilities in Memphis. In addition, personal care services were available to 14 residents of Crumley House Brain Injury Rehab Center.
- 59 adult and youth survivors of brain injury attended camp sessions.
- Project BRAIN transition liaisons are located in three children's hospitals and provided 14 trainings to 50 healthcare professionals. They assisted over 1,500 families in their transition from hospital to home to school.

**Recommendations**

Although much has been accomplished, injuries persist. Work must continue to address the needs of all survivors in the state, particularly in the areas of day programs, housing, long-term care, and rehabilitation. The Advisory Council respectfully recommends that the legislature continue to support making home and community-based services available as an alternative to institutional care.

The TBI Advisory Council commends the legislature for the passage of the sports concussion law which has the potential to improve the safety of sports statewide and extends their gratitude for the opportunity to work to improve the lives of TBI survivors statewide.