

Indiana Traumatic Brain Injury Implementation & Partnership Grant

Indiana Four-Year Statewide Systems of Support Plan for Brain Injury 2009-2013

The intent of this Indiana Statewide Systems of Support Plan is to provide the infrastructure to sustain the Indiana Statewide Action Plan for individuals with a brain injury and the families/care partners. It is imperative that coordinated, accessible, appropriate, and acceptable brain injury services and supports must be available throughout an individual's life as brain injury is complex, variable, personal, and can have life-long effects.¹

Six critical indicators have been identified to build a State Systems of Coordinated Services and Supports²:

- System Entry or Access
- Assistance in Coordination
- Partnership Approach to Service and Support Provision
- Education and Training
- Flexible and Coordinated Long-Term Services and Supports
- Utilization of Data for Policy Development

System Entry or Access

Local Brain Injury Support Networks (LSN) will be developed, initially in Central, Northeast and Southern IN. These pilot LSN's will offer early access to:

- a) Networking opportunities,
- b) Local information, education, and referral,
- c) Identification and enrollment of recent BI survivors in IN Brain Injury Data Base,
- d) Collaboration and data sharing with Indiana State Department of Health's (ISDH) Trauma/Surveillance System,
- e) Facilitation of Local Support Network participation in local BIAI support groups, and
- f) Resource Facilitation Providers

¹, ² Promising Practices, State Systems of Coordinated Services and Supports for Individuals with Traumatic Brain Injury and Their Families. National Association of State Head Injury Administrators, TBI Technical Assistance Center Draft Document.

Referral to LSN's will occur via:

- Regional BIAI Support Group Leadership
- Central Indiana BIAI Helpline
- Regional Providers of service, such as the acute rehabilitation facility, emergency departments, and post-acute rehabilitation facilities
- Regional Vocational Rehabilitation TBI Specialist
- Regional State Agency personnel participating in the LSN
- Other regional providers such as attorneys, physician specialists, etc.

During the 4 year Indiana Statewide Action Plan, the Local Support Networks will increase to a total of 5, representing all 5 Vocational Rehabilitation Regions.

Assistance in Coordination

Individuals with a BI and the family/care partner are often overwhelmed and require an advocate to assist in the search, assessment of, and procurement of acceptable resources and services. Indiana piloted a BI Resource Facilitation Services Model to offer assistance in navigating State Systems, providers, funding options, and more.

Indiana's Resource Facilitation (RF) Pilot Project for individuals with a brain injury and family members/care partners was initiated in 2008. This person-directed model included assessing the individual's and family/care partner's individualized needs, developing a RF plan with the individual with a BI and the family/care partner, providing information and referral, advocating, obtaining, and accessing services & supports, offering routine, scheduled follow-up, reassessment of needs, and satisfaction surveys for ongoing quality assurance and program development.

Indiana's Resource Facilitators were person-centered advocates, not bound by systems, who bridge information across systems, throughout recovery, as needs arise; and assist in goal attainment. Services were holistic, are initiated as early as possible, continued beyond hospital discharge, included on-going and flexible resource development for home and community and included assistance in managing & organizing information.

Each participant received BI Resource Facilitation Services for a period of six months. Preliminary data demonstrates that individuals receiving Brain Injury Resource Facilitation services are 2.5 times as likely to return-to-work or school when compared to the control group which received standard services, without the benefit of BI Resource Facilitation.

Funding options for Brain Injury Resource Facilitation may include:

- Medicaid Waivers

- Vocational Rehabilitation - Purchase of Service Agreement
- Veterans Administration
- Special Education
- Other sources such as Insurance or private pay

Partnership Approach to Service and Support Provision

Throughout the recovery process there may be a multiplicity of providers, both professional and para-professional, called upon to use their expertise and knowledge with fluctuating levels of involvement and for indeterminate periods of time. A Partnership Approach expects that all providers of services recognize there are many providers working on behalf and with the individual with a BI and the family. Therefore, the individual and the family are full partners in the decision-making and service delivery process.³

Indiana proposes the development of an **Indiana Brain Injury Leadership Board**, including representatives from: Families/care partners of TBI Survivors, FSSA, OMPP, BIAI, DOE, ISDH, VA, SCI-TBI Research Board, the private sector, and others. This Board will meet quarterly to:

- a) Oversee the Indiana Statewide Action Plan, the Statewide Systems of Support Plan, and the Sustainability Plan;
- b) Perform an annual review of accomplishments;
- c) Address emerging and related state issues - as appropriate;
- d) Review State Policies related to BI; offer suggested Policy changes;
- e) Review Indiana's TBI Grant from US DHHS - HRSA;
- f) Coordinate and prioritize federal, state, and other funding; and
- g) Develop, disseminate and promote utilization of the Indiana Brain Injury Resource Center/Indiana Brain Injury Data Base .
- h) Oversee the Local Support Networks

³ Promising Practices, State Systems of Coordinated Services and Supports for Individuals with Traumatic Brain Injury and Their Families. National Association of State Head Injury Administrators, TBI Technical Assistance Center Draft Document.

Education and Training

Education and training about TBI is the core of a coordinated system of services and supports.

Through the Indiana Brain Injury Resource Center, and with oversight by the Indiana BI Leadership Board, education and training will be developed and offered to:

- a) Resource Facilitators,
- b) State agency staff and others as identified by the Indiana BI Leadership Board,
- c) Ongoing consultation with the Person and Family-Directed Services Work Group on Resource Facilitation and other organizations to continue collaboration and development of best practices in Resource Facilitation,

Formal education of survivors, families/care partners and professionals will be offered through Brain Injury Association of Indiana's annual and regional educational conferences, as identified on the BIAI Strategic Plan, and via Local Support Network opportunities, addressing topics identified in the 2007-08 Indiana Statewide Needs and Resources Assessment Report.

Certified Brain Injury Specialists training will be offered via the Brain Injury Association of Indiana or the Indiana Brain Injury Resource Center.

Flexible and Coordinated Long-Term Services and Supports

Individuals with TBI and their families may need life-long services and supports, however, the level of intensity at which services are needed varies. The long-term effects of TBI may manifest over time, therefore systems must be designed with the flexibility of allowing individuals to take recesses and then to re-enter as needs are identified....No one State Agency can be expected to shoulder the responsibility of being the sole provider of services and supports within the State.⁴

Indiana will utilize the Brain Injury Resource Facilitation and Local Support Network Models to offer on-going, long-term access to services and supports.

⁴ Promising Practices, State Systems of Coordinated Services and Supports for Individuals with Traumatic Brain Injury and Their Families. National Association of State Head Injury Administrators, TBI Technical Assistance Center Draft Document.

Indiana's State Agencies will review opportunities and implement blended funding; that is, funding from more than one source will be pooled to support staff and services, to maintain Indiana's BI Resource Facilitation Model.

Using Data for Policy Development

Accurate and current data are critical for making informed policy decisions that affect systems change. States should recognize there are multiple potential data sources and build data linkages between agencies and other credible data sources as individuals with TBI frequently are receiving services for secondary conditions resulting from the TBI.⁵

Noted in the Indiana Four-Year Statewide Action Plan is the development of a Web-based BI Database (IN Brain Injury Data Base) that includes core injury and demographic information, Resource Facilitation data, Measures of ability, adjustment and participation, and relevant health care information.

This database will serve the Local Support Network, State Agencies, the Indiana State Department of Health Trauma Registry, Federal Agencies, and others in tracking and measuring outcomes and supporting policy change for individuals with a brain injury within the State.

In addition to data sharing within the State, the Indiana Four-Year Statewide Action Plan for Brain Injury has provisions to consult with the Iowa and Minnesota Resource Facilitation Program Leadership throughout the HRSA TBI Grant Planning and Implementation Partnership Grant for Outcome Measurements.

⁵ Promising Practices, State Systems of Coordinated Services and Supports for Individuals with Traumatic Brain Injury and Their Families. National Association of State Head Injury Administrators, TBI Technical Assistance Center Draft Document.

This Statewide Systems of Support Plan is funded - in part - by a US Department of Health and Human Services, Health Resources and Services Administration, Traumatic Brain Injury Planning and Implementation Partnership Grant. HRSA has awarded the Indiana Family and Social Services Administration a total of \$300,000.00. Indiana is scheduled to receive about \$100,000.00 for each year of the three-year grant. FSSA and its consultants and partners are contributing a total of \$150,000.00 in matching and in-kind funding during the April 1, 2006 through March 31, 2009 grant cycle. The total TBI Planning and Implementation Partnership Grant budget is \$450,000.00. Federal funding comprises about 66% of the total budget and State funding comprises about 34% of the total budget.