FY 10 Report to Legislature

Overview
The Traumatic Brain Injury (TBI) Fund was established in 2008 by the Utah Legislature as a restricted special revenue fund. The fund consists of gifts, grants, donations, legislative appropriations ($50,000 in one time funding) and other funding from private sources. The fund is administered through the Utah Department of Health (UDOH) Violence and Injury Prevention Program (VIPP). The fund monies may be expended to:

- Educate the general public and professionals on the treatment and prevention of TBI;
- Provide access to evaluations and coordinate short-term care to assist an individual in identifying services or support needs, resources, and benefits for which the individual may be eligible; and
- Develop and support an information referral system for persons with a TBI and their families.

As a result of this limited funding, the TBI Fund Advisory Committee agreed to focus efforts on resource facilitation. Resource facilitation is a process that helps individuals and families by providing consistent, ongoing, short-term support to assist with problem solving, linking people in need with available and appropriate resources (such as information, services, and supports) to meet their goals, and assist with successful return to school, work, or community reintegration.

Accomplishments
1. For every $1 spent of the TBI Fund at least 96 cents of private matching funds were obtained.

2. The following services have been provided as of June 30, 2010:
   - 59 participants with TBI received one to one resource facilitation services at an average cost to the TBI fund of $275 per person. The contracting agencies provided matching funds, so the actual cost of the services was higher.
11 participants received a psychological/psycho educational evaluation to assist with an accurate diagnosis and clarify needed services that will be most beneficial. The evaluations were very valuable to the participants and their families in understanding the needs and abilities of the person with TBI. Participants receiving this evaluation were determined by the resource facilitators to be in need and to have no other financial resources available to them to pay for the cost.

10 of the 59 participants that received resource facilitation services are in need of and receiving ongoing services.

212 Emergency Department clients were contacted and 97 were provided education.

Approximately 30 additional people received an intake interview but did not qualify for services because they had an acquired brain injury (i.e. as a result of West Nile virus, encephalitis, or anoxia etc.), not a traumatic brain injury.

Needs and Concerns Documented by Contractors

- Services work best when families are intact and supportive—it is difficult without family support.
- Insurance and Medicaid barriers
  - Limited benefits, high co-pays, uninsured, unaffordable.
  - Most assistance applications are too complicated for a TBI survivor to be able to complete without much help.
  - Providers who are not willing to serve individuals with TBI, due to low reimbursement levels from Medicaid.
- Isolation and lack of support among TBI survivors combined with impulsivity increases the risk of suicide.
- People often avoid asking for help due to fear of being told no again—they are overwhelmed with needs and underserved with resources.
- Funding to cover outreach costs and the publicizing of the resources available.

TBI Fund Advisory Committee

TBI Fund Advisory Committee members were appointed by the UDOH Executive Director, Dr. David Sundwall, and represent individuals who are familiar with TBI, its causes, diagnosis, treatment, rehabilitation, and support services, including individuals who have sustained a TBI and family representatives.

Outreach Efforts

A web page (http://health.utah.gov/vipp/traumaticBrainInjury/tbi_trust_fund.html) refers individuals to service agencies and answers inquiries from families on how the fund might help them. Meeting times and past meeting minutes are posted to the web page.

Contact

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Submitted: December 16, 2010