

VIRGINIA DEPARTMENT OF REHABILITATIVE SERVICES

BRAIN INJURY ACTION PLAN IN VIRGINIA: 2009-2013

Executive Summary

The brain can be injured in many ways, and a brain injury is referred to by many names. However, all brain injuries are classified according to *when* they occur and the *cause*:

- Brain damage that occurs before or during the birth process is **congenital** and resulting impairment is considered to be a developmental disability because it happens during the early, developing years of the child. Injury to the brain following birth is **acquired** and can be caused by traumatic or non-traumatic means, or both.
- **Non-traumatic** brain injuries result from internal causes such as strokes and aneurysms, lack of oxygen or blood to the brain, and exposure to toxic substances. **Traumatic** injuries result from external causes such as blunt force against the skull or the skull hitting against a fixed object, which can occur in car crashes, falls, gunshot wounds, and assaults, including those due to domestic violence and child abuse (“Shaken Baby Syndrome”).

As defined in the Code of Virginia, "Brain injury" (§ 37.2-403) means any injury to the brain that occurs after birth...[and] is acquired through traumatic or non-traumatic insults. Non-traumatic insults may include, but are not limited to anoxia, hypoxia, aneurysm, toxic exposure, encephalopathy, surgical interventions, tumor and stroke. Brain injury does not include hereditary, congenital or degenerative brain disorders, or injuries induced by birth trauma.”

The definition of brain injury used by the Brain Injury Association of America (BIAA) and the Brain Injury Association of Virginia (BIAV) is: “A brain injury can be acquired through traumatic or non-traumatic events. A traumatic brain injury (TBI) is an alteration in brain function, or other evidence of brain pathology, caused by an *external force*, including falls and motor vehicle accidents. A non-traumatic brain injury is the result of an *internal source*, as from a stroke or lack of oxygen to the brain.”

Nearly 200,000 Virginians may be living with a brain injury related disability.

The CDC estimates that 1.1% of the population in the U.S. is living with a traumatic brain injury (TBI) related disability. Based on current Virginia census estimate of 8,001,024, 181,623 Virginians experience disability as a result of a traumatic brain injury: 88,011 Virginians disabled as a result of TBI (including 21,309 of children aged 1-18), and 93,612 disabled due to stroke.

The range of effects of brain injury may include impairments in physical, cognitive, emotional, and sensory functioning which can affect every area of a survivor's life. Depending upon where the brain has been damaged, and the nature of the injury (traumatic versus non-traumatic), the resulting impairments will vary from person to person. Just as every brain is unique, every brain injury results in a variety of short and long-term effects.

Recent estimates put brain injury’s annual cost to society at \$60 billion annually.

The costs of injury, both in terms of economic and human impact, are immense. The extent of the problem has compelled Virginia’s brain injury community - including people with brain injury, family members / caregivers, service providers, and state government - to develop a comprehensive plan to address the needs of people with brain injury and their family members/caregivers across the Commonwealth. A **Statewide Needs and Resources Assessment** was completed in 2000 through an initial Federal Traumatic Brain Injury (TBI) Act Planning Grant (1998-2000), and was used as the basis for the development of the **1998-2000 Statewide TBI Action Plan**.

During the revision of the *1998-2000 Statewide TBI Action Plan*, progress and goals to date were examined:

- Progress in critical areas was reported through examples of successes and failures, as well as recommendations for future actions. Notable achievements include the development of a network of core services across the state, including Case Management, Regional Resource Coordination, and the development of the innovative Clubhouse model program. All of these services facilitate increased access to specialized case managers, expansion of supported living options, the development and strengthening of survivor and family support groups across Virginia, and the utilization of virtual and web-based access to educational materials.
- Two areas which fell short of expectations included the development of specialized residential supports and the availability of specialized treatment options for individuals with challenging behaviors due to brain injury; this is due primarily to lack of fiscal resources.

The 2006 Virginia General Assembly commissioned a study on brain injury in Virginia by the Joint Legislative Audit and Review Commission (JLARC). JLARC staff conducted interviews, surveys, and focus groups with people with brain injury, family caregivers, service providers and professionals throughout the Commonwealth and released its comprehensive report in 2007. The study detailed the number of Virginians living with disabilities from brain injuries, reported the success of state-funded community-based services, and described the lack of treatment facilities for people with brain injury and challenging behavioral issues, as well as the lack of adequate insurance for long-term health care. In 2008 the Office of the Secretary of Public Safety collected data on brain injury prevalence among incarcerated Virginians, a segment overlooked in past reports.

The *2009-2013 Brain Injury Action Plan*, developed under the leadership of the Virginia Brain Injury Council, serves as a “blueprint” for addressing gaps in services and unmet needs of Virginians with brain injury and their families. Since the development of the original *Statewide TBI Action Plan in 1998-2000*, surveys and town meetings were used to elicit feedback for revising and updating the plan. The 2009-2013 Action Plan identifies and makes recommendations regarding current (and remaining) gaps in services and resources as determined by Virginia’s brain injury community.

- 1. Expanded Access to Brain Injury Supports and Services** – Enhance comprehensiveness of services available to all Virginians with brain injury; expand residential and community-based neurobehavioral treatment options; expand community living options and appropriate supports to facilitate community integration; and enhance opportunities to contribute to the community through participation in productive activities.
- 2. Systems Change and Management** - Develop evidence-based policy and program initiatives to meet the needs of people with brain injury and their family members / caregivers, particularly those representing unserved or underserved populations; increase funding for brain injury programs and services to address gaps in service delivery system.
- 3. Community Impact** - Provide brain injury information, resources, and education to improve public knowledge and enhance quality of services for people with brain injury and their family members / caregivers.

Virginia’s *Brain Injury Action Plan* remains as a flexible working document that will guide the development of a comprehensive service system for Virginians with brain injuries. Implementation of the plan will be monitored by the Virginia Brain Injury Council, and involves collaboration among people with brain injury, family members / caregivers, state agencies, and community partners (service providers) serving people with brain injury throughout the Commonwealth.