

**REPORT OF THE
VIRGINIA DEPARTMENT OF REHABILITATIVE SERVICES**

**Report of the Commonwealth
Neurotrauma Initiative Advisory
Board on Aggregated Data on the
Operations and Funds of the
Commonwealth Neurotrauma
Initiative Trust Fund**

**TO THE GOVERNOR AND
THE GENERAL ASSEMBLY OF VIRGINIA**



SENATE DOCUMENT NO. 5

**COMMONWEALTH OF VIRGINIA
RICHMOND
2003**

*Commonwealth Neurotrauma Initiative
Advisory Board*

JOHN WARD, M.D., CHAIR
JAMES A. ROTHROCK, COMMISSIONER, VIRGINIA DEPARTMENT OF REHABILITATIVE SERVICES ♦ PHILLIP U. BROWN
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October 1, 2002

To: The Honorable Mark R. Warner
Governor, Commonwealth of Virginia

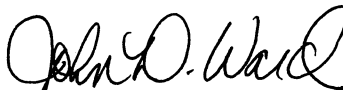
and

The General Assembly of Virginia

The report attached hereto is submitted in satisfaction of Virginia Code Section 51.5-12.3(C)(4).

This report constitutes the annual report of the Commonwealth Neurotrauma Initiative Advisory Board, a collegial body affiliated with the Department of Rehabilitative Services. The above-cited law requires an annual report from the Advisory Board containing aggregate data on the operations and funding of the Commonwealth Neurotrauma Initiative Trust Fund.

Respectfully submitted,



John D. Ward, M.D.
Chair, Commonwealth Neurotrauma
Initiative Advisory Board

COMMONWEALTH NEUROTRAUMA INITIATIVE ADVISORY BOARD

ANNUAL REPORT OCTOBER 1, 2002

Executive Summary

In Fiscal Year 2001, regulations implementing the Commonwealth Neurotrauma Initiative (CNI) Trust Fund became effective and the program issued the first Request For Proposals (RFP) on March 1, 2001. In response to this initial RFP, the program received a total of \$6.1 million in grant requests for community-based rehabilitation programs and research on the mechanisms and treatment of neurotrauma. The Advisory Board approved thirteen (13) proposals for disbursements from the Fund totaling \$3.5 over a three-year period (FY 2002 through FY 2004).

Proposals received under *Option A: Research on the Mechanisms and Treatment of Neurotrauma* and *Option B: Community-Based Rehabilitation Programs* are reviewed and evaluated by different panels due to the technical and scientific nature of the research applications. To enhance the administration of the grants program, the Advisory Board voted to implement two different timelines for issuing the *Option A* and *Option B* RFPs. Thus, the RFP for *Option B* was issued in August 2002 with a deadline of October 1; the RFP for *Option A* will be issued February 1, with a deadline of April 1, 2003.

The General Assembly passed legislation, effective July 1, 2002, to amend and reenact Section 46.1-422 of the Code of Virginia, to amend the Code of Virginia by adding in Title 51.4 a chapter numbered 3.1 and to repeal Article 12 (Section 32.173.1 et. seq.) of Chapter 2 of Title 32.1 relating to the Commonwealth Neurotrauma Initiative. The changes in the Code designate the Department of Rehabilitative Services (DRS) as the agency that will administer the Commonwealth Neurotrauma Initiative (CNI). The changes also authorize the use of up to five percent (5%) of the trust fund annually to cover the administrative costs of staffing the CNI Advisory Board, developing and issuing Requests For Proposals (RFPs), reviewing grant applications, and awarding and monitoring grantee activity.

As of August 31, 2002, the balance in the Fund totals \$4,103,358, which includes the funds allocated for years two and three of the grants awarded in August/November 2001 under *Option A* and *Option B*. Funds available for grant awards, as of August 31, 2002 total \$1,234,958.87. As of September 30, 2002, no charges have been assessed to the Trust Fund for the administrative cost of staffing the CNI Advisory Board by the Department of Rehabilitative Services. The projected annual inflow of funds is approximately \$1.2 million.

Background and Legal Framework

In 1997, Senate Bill 1132 (Acts of Assembly, c. 567) established the Commonwealth Neurotrauma Initiative (CNI). Article 12 of Chapter 2 of Title 32.1 (Section 32.1-73.1 *et seq.*) of the Virginia Code authorizes establishment of the CNI Trust Fund, a special nonreverting fund, and the CNI Advisory Board, a permanent collegial body affiliated with the State Board of Health pursuant to Section 2.1-1.6 of the Code.

In 1998, Senate Bill 484 (Acts of Assembly, c. 703) amended the CNI law. As amended, Code Section 32.1-73.2 (B) provides that: (i) moneys in the CNI Trust Fund “shall be used solely to support grants for Virginia-based organizations, institutions, and researchers” and (ii) “fifty percent [of the moneys in the Fund] shall be allocated for research on the mechanisms and treatment of neurotrauma [referred to as *Option A*, below] and fifty percent shall be allocated for rehabilitative services [*Option B*].”

The 1998 legislation also created a mechanism for funding the CNI. Moneys are deposited into the Trust Fund pursuant to Code Section 18.2-271.1 (E). That section provides that a fee of \$105 shall be charged “for reinstatement of the driver’s license of any person whose privilege or license has been suspended or revoked as a result of . . . [a specified traffic violation],” and \$25 of this fee “shall be transferred to the . . . [CNI] Trust Fund.” This mechanism continues to operate, placing additional moneys into the Fund.

In 2002, the General Assembly enacted legislation to amend and reenact Section 46.1-422 of the *Code of Virginia*, to amend the *Code of Virginia* by adding in Title 51.4 a chapter numbered 3.1 and to repeal Article 12 (Section 32.173.1 *et. seq.*) of Chapter 2 of Title 32.1 relating to the Commonwealth Neurotrauma Initiative. The changes in the *Code* designated the Department of Rehabilitative Services (DRS) as the agency that will administer the Commonwealth Neurotrauma Initiative (CNI), and established a provision authorizing no more than five percent of the trust fund annually to cover the costs of staffing the CNI Advisory Board and reviewing and monitoring grants.

Virginia Code Section 51.5-12.3(C)(4) requires the CNI Advisory Board to “[r]eport annually on October 1, to the Governor and the General Assembly, aggregate data on the operations and funding of the . . . [CNI Fund].” The present document constitutes the 2002 annual report.

Operation of the CNI Trust Fund

On February 14, 2001, regulations adopted by the State Board of Health to implement the CNI Trust Fund became effective. (These regulations have

been codified in the Virginia Administrative Code at 12 VAC 5-185-10 *et seq.*) On March 1, 2001, the CNI Advisory Board published the first Request For Proposals (RFP) with a deadline of June 1, 2001 for submission of applications for funding.

The Advisory Board, with staff support from the Department of Rehabilitative Services (DRS), reviewed the proposals received in response to the March 1, 2001 RFP that involve the provision of rehabilitative services and research on the mechanisms and treatment of neurotrauma, *i.e.*, proposals falling under *Option A* and *Option B*. In August 2001, the Advisory Board recommended seven (7) *Option B* proposals for funding. *Option B* proposals seek to effectively address the complex needs of persons with traumatic brain and spinal cord injuries by providing needed services through the development of expansion of model programs/services. In November 2001 the Board approved six *Option A* proposals for funding. *Option A* proposals focus on conducting research on the mechanisms and treatment of neurotrauma.

As a way to streamline and enhance the grant administration process, the Board also voted at the November 2001 meeting to issue two separate Request For Proposals (RFPs) every year (dependent upon fiscal health of the fund). The Board approved two different RFP issue dates for *Option A: Research on the Mechanisms and Treatment of Neurotrauma* and *Option B: Community-Based Rehabilitative Programs*. Subsequent to the change, the *Option B* RFP was issued August 2002, with a submission deadline of October 2002; the *Option A* RFP will be issued February 2003 with a deadline of April 2003.

Aggregate Data on the Funding of the CNI Trust Fund

Moneys have been collected and deposited into the CNI Trust Fund since 1998, when a citizen created a positive balance in the Fund by donating \$25. The CNI fund is a special nonreverting fund in the state treasury consisting of funds collected through a reinstatement fee charged to restore an operator's license when it has been revoked or suspended for specified dangerous driving offenses. The Fund balance has continually increased by operation of the statutory funding mechanism in which a portion of the reinstatement fee is deposited into the Fund.

As of August 31, 2002, the balance in the Fund totals \$4,103,358, which includes the funds allocated for years two and three of the grants awarded in August/November 2001 under *Option A* and *Option B*. The balance of funds available for awarding as of August 31, 2002 is \$1,234,958.87.

During its first funding cycle in November/December 2001, the CNI Advisory Board awarded one to three years of funding to the following proposals:

Option A: Research on the Mechanisms and Treatment of Neurotrauma

Grantee	Total Award	Title of Proposal
VCU – Medical College of Virginia – Richmond	\$148,501 76,228 1 st Yr 72,273 2 nd Yr	<i>“Delayed Treatment of Experimental Traumatic Brain Injury: The Role of the AMPA Receptor” – Robert Hamm, Ph.D.</i>
VCU – Medical College of Virginia – Richmond	\$446,987 148,053 1 st 149,664 2 nd 149,270 3 rd	<i>“Endogenous Neural Stem Cells and Brain Repair after Traumatic Brain Injury” – Ross Bullock, MD, Ph.D.</i>
Woodrow Wilson Rehabilitation Center – Fishersville	\$13,393.65 One Yr. Grant Award	<i>“Clean Techniques of Bladder Management: Comparison of Cleaning and Storage Methods” – Douglas Murphy, MD</i>
University of Virginia-Charlottesville	\$258,515 135,694 1 st 122,821 2 nd	<i>“Novel Therapeutic Interventions in Traumatic Brain Injury” – Kevin Lee, Ph.D. David Onkonkwo, MD, Ph.D.</i>
University of Virginia – Kluge Children’s Rehab. Center – Charlottesville	\$446,865 149,741 1 st 147,596 2 nd 149,529 3 rd	<i>“Dopamine Agonist Therapy in Low Response Children Following ABI” – James Blackman, MD, MPH</i>
University of Virginia – Charlottesville	\$450,000 150,000 Each Year	<i>“Mechanisms of Secondary Injury Following Traumatic Brain Injury – Gregory Helm, MD, Ph.D</i>

Option B: Community-Based Rehabilitative Programs

Grantee	Total Award	Title of Proposal
Brain Injury Association of Virginia – Richmond	\$146,416 – One Yr. Award w/option for two renewals	<i>“Statewide Model of Regional Brain Injury Resource Centers”</i>
Brain Injury Services, Inc. – Fairfax	\$430,035 – 140,340 1 st 144,905 2 nd 144,790 3 rd	<i>“Community-Based Pediatric Brain Injury Case Management Program”</i>
Brain Injury Services of Southwest Virginia – Roanoke	\$110,109 59,546 1 st 50,563 2 nd	<i>“A Distance Learning Model for Life Skills Services”</i>
Commonwealth Support Systems – Eastern Shore	\$232,726 101,626 1 st 63,126 2 nd 67,974 3 rd	<i>“Expansion of Day Program for Persons with Brain Injury on the Eastern Shore”</i>
Community Futures/The Mill House – Richmond	\$413,581 149,833 1 st 149,993 2 nd 113,755 3 rd	<i>“Clubhouse Expansion Project”</i>
John Jane Brain Injury Center – Charlottesville	\$144,105 – One Yr. Award w/option for two renewals	<i>“Use of the Clubhouse Model to Improve Quality of Life of Persons with Traumatic Brain Injury in Charlottesville and Surrounding Area”</i>
Woodrow Wilson Rehabilitation Center – Fishersville	\$281,742 133,930 1 st 92,357 2 nd 55,455 3 rd	<i>“Improving Community-Based Follow-up Services for Long-Term Health Maintenance Needs for Persons with Spinal Cord Injury”</i>

