# August 10, 2006

The Honorable John H. Chichester Chair, Senate Finance Committee P. O. Box 626 General Assembly Building Richmond, Virginia 23218

Dear Senator Chichester:

As you know, the 2004 General Assembly appropriated funding for brain injury services in FY 2005 (\$825,000) and FY 2006 (\$1,075,000), which included \$75,000 each year in the Governor's budget. The 2004 General Assembly also directed that

Beginning August 1, 2005, the Department of Rehabilitative Services (DRS) shall submit an annual report to the Chairmen of the Senate Finance and House Appropriations Committees documenting the number of individuals served, services provided, and success in attracting non-state resources.

The Department of Rehabilitative Services (DRS) is pleased to submit its 2006 Annual Report to you. As a result of the FY '05 funding noted above, we reported last year on the development of new programs in unserved and underserved areas of the state, as well as the expansion of services being provided by existing organizations. With the increase in FY '06 funding, Virginia has made considerable progress in establishing a stronger and wider "network" of providers and an infrastructure for the delivery of services. As you read this report, I would like to offer some highlights and clarifications.

In reviewing the number of people served during FY '06, there is noted variability from program to program based on location and on the type of services provided. In FY '05, the Department of Rehabilitative Services worked with stakeholders to identify a footprint of "core" services that would provide a foundation for ongoing development of brain injury services in a community: regional resource coordination; case management; and day/clubhouse programs. The capacity for the number of people served through these three service models varies due to the different ways in which services are delivered. A brief explanation of the three core services follows:

Case management: a service delivery model that involves a comprehensive assessment by a case manager of an individual's needs; development of supports and strategies to address the needs; and coordination/monitoring of services to ensure optimal opportunity for success. Case management matches an individual with support services needed to maximize his or her independence and quality of life, such as medical, psychological, transportation or vocational services, recreational and social opportunities, and a variety of other services. Case management ensures that individuals move from one service to another as needed, avoiding long gaps in service. An individual's need for this service will vary from brief intervention periods to long term service coordination. Case management is provided by one staff person who can serve a caseload of approximately 35 people; cost is approximately \$75,000 per case manager to include salary, benefits, and limited funds to purchase needed services.

<u>Clubhouse Program</u>: an intensive (5 days per week) service delivery model in which "members" work side-by-side with staff to run the program based on a "work-ordered day." Participation in the clubhouse program leads to improved work skills and behaviors to support an individual's community and vocational reentry. The clubhouse model provides a peer-driven, supportive environment that aids in physical, cognitive, and emotional recovery and improves social and work-related skills. Membership in the clubhouse is voluntary and lifelong; members may attend as often as they wish (up to five days a week). See <a href="http://www.iccd.org">http://www.iccd.org</a> for additional information on the clubhouse model. A clubhouse program typically has 2-3 staff and 40-50 "members" – depending upon locale - with a daily census of approximately 15 (members attend as they wish); cost is approximately \$150,000 to include staff salaries, benefits, as well as rent and operation costs for the program.

**Day Program:** an intensive (5 days per week) service delivery model in which individuals with brain injury have the opportunity to participate in structured activities in a supportive environment. Activities may include vocational tasks, community outings, computer training, and social/recreational activities. A day program is typically more staff-driven and less structured than the "work-ordered day" of a clubhouse program (see "clubhouse" above). A day program typically has 2-3 staff and 30-35 participants – depending upon locale – with a daily census of approximately 5-10; cost is approximately \$150,000 to include staff salaries, benefits, as well as rent and operation costs for the program.

Regional Resource Coordination: a service delivery model in which one staff person, a Regional Resource Coordinator, provides brain injury knowledge and expertise to an unserved / underserved community. A Regional Resource Coordinator identifies resources and builds coalitions to address local needs; provides training, education, and public awareness activities; and establishes information and referral, outreach, and advocacy activities within a local community. Regional Resource Coordination is provided by one staff person who serves the entire community; cost is approximately \$75,000 to include salary, benefits, and limited funds to support educational and awareness activities.

One of the agency's goals during FY '06 was to support the development of services for people with brain injury in the Southwestern part of the state. DRS was able to identify short-term funding for Brain Injury Services of Southwest Virginia (BISSWVA) to hire a part-time case manager in Abingdon, co-located at the Appalachian Center for Independent Living. This has been a successful partnership and although the DRS funding ended June 30, 2006, BISSWVA identified funding to expand the position to full-time prior to the end of fiscal year. Fortunately, additional funding was included in the Governor's budget for FY '07 for case management services in Southwest Virginia, allowing BISSWVA to continue the full-time Abingdon position and to establish case management services in other unserved areas of far Southwest.

Finally, one of our goals during FY '06 was to develop a reporting and monitoring system for all of the state-funded programs in Virginia's growing "network." DRS Brain Injury & Spinal Cord Injury Services Unit has been working diligently with DRS Information Systems staff and with representatives from all of the currently funded programs. We are eager to unveil the Brain Injury Services (BIS) Programs SCORECARD, a web-based reporting system by which programs will submit quarterly reports on achievement of goals in four global domains: residential, independent living, productive activity, and community impact. The reports of each of the programs on the SCORECARD system will be available for public review (a rating - meets expectations, exceeds expectations, or below expectations – will be calculated automatically by the data submitted by the program in each category). The SCORECARD is one method for assessing how effectively programs are utilizing state funding to achieve their stated goals. The SCORECARD project is currently in field testing and is expected to "go live" in January 2007.

On behalf of Virginians with brain injuries, we extend our appreciate to you and to members of the General Assembly in responding to the critical and increasing needs of Virginians with brain injuries. We look forward to sharing information next August on how we have continued to improve and expand Virginia's network of brain injury services providers with the newest appropriation of funds for FY '07 and '08.

With best regards, I am

Sincerely,

James A. Rothrock

JAR/pg

Enclosure: 2006 Annual Report

C: Angi Murphy, *Division of Legislative Automated Systems*Susan Massart, *House of Delegates*Joe Flores, *Senate of Virginia* 

# August 10, 2006

The Honorable Vincent F. Callahan, Jr. Chair, House Appropriations Committee P. O. Box 947
General Assembly Building Richmond, Virginia 23218

Dear Senator Delegate Callahan:

As you know, the 2004 General Assembly appropriated funding for brain injury services in FY 2005 (\$825,000) and FY 2006 (\$1,075,000), which included \$75,000 each year in the Governor's budget. The 2004 General Assembly also directed that

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On behalf of Virginians with brain injuries, we extend our appreciate to you and to members of the General Assembly in responding to the critical and increasing needs of Virginians with brain injuries. We look forward to sharing information next August on how we have continued to improve and expand Virginia's network of brain injury services providers with the newest appropriation of funds for FY '07 and '08.

With best regards, I am

Sincerely,

James A. Rothrock

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Enclosure: 2006 Annual Report

C: Angi Murphy, *Division of Legislative Automated Systems*Susan Massart, *House of Delegates*Joe Flores, *Senate of Virginia* 

# ANNUAL REPORT OF THE VIRGINIA DEPARTMENT OF REHABILITATIVE SERVICES Brain Injury & Spinal Cord Injury Services

For State Fiscal Year 2005-06 (July 1, 2005 to June 30, 2006)

The 2004 General Assembly appropriated funds for brain injury services for State Fiscal Years 2005 and 2006 as follows: \$825,000 for FY '05 and \$1,075,000 for FY '06. This included \$75,000 each year from the Governor's budget for "expansion of brain injury services in Southwest Virginia." Further, the General Assembly directed that

3. Beginning August 1, 2005, the Department of Rehabilitative Services (DRS) shall submit an annual report to the Chairmen of the Senate Finance and House Appropriations Committees documenting the number of individuals served, services provided, and success in attracting non-state resources.

The information contained herein constitutes the August 1, 2006 Annual Report from the Department of Rehabilitative Services (DRS) to the Chairmen of the Senate Finance and House Appropriations Committees.

### **EXECUTIVE SUMMARY**

The 2004 General Assembly provided a biennial total of \$1.9 million in additional permanent funds for SFY '05-'06 for brain injury services: \$750,000 for FY '05 and \$1,000,000 for FY '06, including \$75,000 each year from the Governor's budget for the expansion of services in Southwest Virginia. As the lead agency to coordinate services for people with physical and sensory disabilities, the Department of Rehabilitative Services (DRS) was designated to administer the new funds. DRS worked with Legislative Services and representatives of brain injury advocacy groups and programs to assure equitable distribution of funds among those programs deemed at highest risk of "closing their doors" due to the end of short-term grant funding. The programs included Brain Injury Association of Virginia; Brain Injury Services, Inc.; Brain Injury Services of Southwest Virginia; Community Futures Foundation; Commonwealth Support Systems; and Virginia NeuroCare.

DRS anticipated slow start-up costs for the newly funded FY '05 programs and to maximize use of all funds, the agency used \$25,000 of the appropriation to help support two critical statewide brain injury projects. During the summer of 2005, DRS conducted Town Meetings statewide to begin the process of updating Virginia's 2000 Traumatic Brain Injury Action Plan. The development of the statewide **Brain Injury Action Plan in Virginia** for 2006-2010 will continue this as an activity under a three-year federal TBI Act Grant awarded to DRS effective April 1, 2006 (\$100,000 annually in federal funds). DRS also used a portion of funds to develop a **Brain Injury Services (BIS) Programs SCORECARD** reporting system for monitoring state-funded programs on an ongoing basis, using a consistent measurement system across programs. The SCORECARD system is being field tested this summer and is expected to be fully operational by January 2007. DRS' one-time use of the FY '05 state funds has resulted in significant progress in two areas critical to the development and quality assurance of Virginia's state-funded service delivery system for people with brain injury.

The chart below shows the distribution of pre-existing <u>and</u> new funding from the 2004 General Assembly appropriation for brain injury programs for State Fiscal Year 2005-06 (July 1, 2005 through June 30, 2006):

STATE-FUNDED PROGRAM	AREAS SERVED	SERVICES PROVIDED	FY '06 FUNDING
Brain Injury Association of Virginia (BIAV)	Statewide; Roanoke; Tidewater	Regional Resource Coordination	\$150,000
Brain Injury Services, Inc. (BIS INC)	Northern Virginia Adult Case Management, Supported Living		\$929,750
	Northern Virginia	Pediatric Case Management	\$140,000
	Fredericksburg	Clubhouse Program	\$121,250
Brain Injury Services of Southwest Virginia (BISSWVA)	Roanoke, New River Valley, Abingdon	Case Management	\$245,000 [\$140,000 + \$75,000 Governor's budget + \$30,000 from DRS]
Community Futures Foundation (CFF)	Richmond	Clubhouse Program	\$150,000
	Newport News	Clubhouse Program	\$150,000
Commonwealth Support Systems, Inc. (CSS)	Virginia Beach	Day Program	\$135,000
	Eastern Shore	Day Program	\$120,000
Virginia NeuroCare, Inc. (VANC)	Charlottesville	Clubhouse Program	\$150,000
		TOTAL:	\$2,291,000

## HISTORY OF FUNDING OF BRAIN INJURY SERVICES

In 1989, the Department of Rehabilitative Services (DRS) was designated in the Code of Virginia as the "lead agency to coordinate services" for people with physical and sensory disabilities, including people with brain injury and/or spinal cord injury. The 1989 General Assembly also appropriated the first funding specifically designated for brain injury services: \$235,000, for an agency-contracted case management services program in Northern Virginia. The **DRS Brain Injury and Spinal Cord Services (BI/SCIS)** program, which manages specialized programs, services, grants and contracts for people with brain injury and/or spinal cord injury, was established by the agency in 1992.

FY '05 was an historic year for funding of brain injury services in Virginia. The FY '05 and FY '06 appropriation totaling \$1.9 million represented the single largest allocation of state funding designated specifically for services to people with brain injury. Prior to this most recent appropriation from the General Assembly, state funding of brain injury services increased an average of approximately \$120,000 per year (an initial allocation of \$235,000 in 1989 to a total allocation of \$2,261,000 in 2006). Funding has increased steadily since 1989, but the most dramatic increases occurred during FY '04 and FY '05. Although this report is for State Fiscal Year 2005-2006, it is important to note that the General Assembly recently allocated \$875,000 for FY '07, including

\$285,000 in the Governor's budget for case management services in Southwest Virginia. These recent increases are testament to the growing effectiveness of collaborative advocacy activities over the past five years.

As a result of the FY 2005 increase in funding (\$825,000), the DRS BI/SCIS program managed a total of \$2,011,000 in programs / services for Virginians with brain injury in FY '05, and a total of \$2,291,000 in FY '06 (this includes state general funds allocated by the General Assembly which are contracted out by DRS, as well as state-funded programs administered directly by DRS). The SFY 2006 funding supported six organizations operating ten programs that provided direct / indirect services to approximately 3300 consumers with brain injury.

The BI/SCIS program also maintains the legislatively mandated Virginia Central Registry for Brain Injury & Spinal Cord Injury, a central registry of persons treated for a traumatic brain injury and/or a traumatic spinal cord injury. The Central Registry was established in the Code of Virginia in 1984 and is operated in partnership with the Brain Injury Association of Virginia (BIAV) via contract. No funds have ever been appropriated by the General Assembly to operate the Registry; which has been supported by DRS; funding has fluctuated over the years. DRS currently supports Registry Operations in the amount of \$82,232 which provides outreach services to an estimated 15,000+ consumers annually. During FY '06, BIAV mailed outreach materials to nearly 19,000 newly injured individuals, the highest number of people reported to the Registry since its inception in 1984.

The Centers for Disease Control (CDC) estimates that approximately 2% of the population nationally is living with the effects of a brain injury. Based on Virginia's 2000 census data, it is estimated that over 140,000 people in Virginia may have a need for some level of support and assistance due to a brain injury. These figures illustrate the critical need for the brain injury services that have been funded through FY '06 General Assembly funding.

APPENDIX "A" DRS Report for Fiscal Year '06 (July 1, 2005 through June 30, 2006)\*

Geographic Location Served	Program Providing Service	Services Provided	FY '06 State Funding	FY '06 Numbers Served	Success in Attracting Non-State Resources
Statewide	Brain Injury Association of Virginia (BIAV)	Registry Outreach and Technical Assistance (VA Central Registry for Brain Injury & Spinal Cord Injury)	\$82,232 (DRS funds, not General Assembly)	19,000+ people with brain injury reported to Central Registry	(N/A: Code of VA DRS mandate; Operation supported by DRS state dollars)
		Regional Resource Coordination (Education, awareness, support; annual conference; central resource library)	\$50,000 (estimated 1/3 of total allocation of \$150,000)	Estimated 833 (1/3 of total 2500 served by program in three locations). Phone, walk-in contacts: 200; Support group: 100; Presentations, workshops, public awareness events: 2200+	Success Achieved \$220,404. In-kind: \$20,375 (Personnel \$18,375, Supplies \$1,500, Equipment \$500); Donations: \$78,562; Federal grant funds through subcontract with DRS: \$121,467 (donations, fundraising, grants, United Way)
Charlottesville	Virginia NeuroCare (VANC)	High Street Clubhouse: Clubhouse (5- day/week vocational, therapeutic social environment; daily attendance varies)	\$150,0000	27 Clubhouse Members (average daily census is 5)	\$6030. Memorial Fund \$1210; Donations \$200; Member Fees \$2800; In-Kind Donations \$1820. (fundraising; donations; service income)
Fredericksburg	Brain Injury Services, Inc. (BIS INC.)	Westwood Clubhouse: Clubhouse (5- day/week vocational, therapeutic social environment; daily attendance varies)	\$121,250	23 Clubhouse Members (40 total serve for the year)	Success Achieved \$2974. (Contributions)

Newport News	Community Futures Foundation (CFF)	Denbigh House: Clubhouse (5-day/ week vocational, therapeutic social environment; daily attendance varies	\$150,000	16	\$36,000. Fundraising \$1,000; Grants \$32,000; Member Fees / Billable Services: \$3,300
Northern Virginia	Brain Injury Services, Inc. (BIS INC.)	Adult Case Management / ADAPT Clubhouse (case management, consultation, supported living, life skills, education / awareness, contract for services)	\$929,750	339 Case Management / 22 Clubhouse Members (32 total served for year)	Success Achieved Adult Case Management \$440,131. County \$288,155; Annual Campaign \$10,648; Contributions \$18,350; Fundraising \$78,714; United Way \$13, 127; Miscellaneous (county funds, grants; United Way, annual campaign; fundraising, service/interest income) Pediatric Case Management \$23,290. Contributions \$18,040; Conference \$1250; Fundraiser \$4000.
		Pediatric Case Management (case management, consultation, school services, life skills, education / awareness, contract for services)	\$140,000	87	
Richmond	Community Futures Foundation (CFF)	The Mill House: Clubhouse (5- day/week vocational, therapeutic social environment; daily attendance varies)	\$150,000	45	\$78,000 Fundraising: \$13,000; Grants: \$5,300; Local Government: \$25,000; Member Fees / Billable Services: \$35,000 (county funds, grants, service income, fundraising)
Roanoke, New River Valley areas	Brain Injury Association of Virginia (BIAV)	Regional Resource Coordination (education, awareness, support, build coalitions, develop services)	\$50,000 (estimated 1/3 of total allocation of \$150,000)	Estimated 833 (1/3 of total 2500 served in three locations)	Success Achieved See data under statewide category. (donations, fundraising, grants, United Way)

	Brain Injury Services of Southwest Virginia (BISSWVA)	Case Management (adult/pediatric case management, consultation, school services, life skills, contract for needed services)	\$245,000	88 Case Management; 10 Volunteer Services; 188 Information & Referral	Success Achieved \$298,126. (\$248,009 in grants, donations, fundraising; \$50,117 in nonstate dollars)
Tidewater (Virginia Beach, Eastern Shore)	Brain Injury Association of Virginia (BIAV)	Regional Resource Coordination (education, awareness, support, build coalitions, develop services)	\$50,000 (estimated 1/3 of total allocation of \$150,000)	Estimated 833 (1/3 of total 2500 served in three locations)	Success Achieved See data under statewide category. (donations, fundraising, grants, United Way)
	Commonwealth Support Systems, Inc. (CSS)	S.E.E.K.: Day Program (5-day/week educational, vocational, social activities; daily attendance varies)	\$135,000	34	Success Achieved  Donations of table, chairs; sponsor of program functions; donations of activity funding (gift cards) and program supplies. (donations; grants)
		No Limits: Day Program (5-day/week educational, vocational, social activities, daily attendance varies)	\$120,000	17	\$2840. United Way Grant: \$1,500; Private donations: \$1,340; Donations of electric wheelchair, assorted craft items. (donations; fundraising; grants)

<sup>\*</sup> Notes: The total amount of <u>new FY</u> '06 funding allocated by the General Assembly for brain injury services was \$1,075,000. This chart reflects a total of \$2,291,000 because it includes pre-existing state funding of \$1,186,000, as well as short-term funding of \$30,000 provided by DRS to Brain Injury Services of Southwest Virginia to support a part-time case manager in Abingdon through the end of June 30, 2006.