# 2021 Highlights of Pennsylvania's Traumatic Brain Injury Advisory Board



# **Programs, Activities and Supports**

The Pennsylvania (PA) Department of Health (Department) formed the Traumatic Brain Injury (TBI) Advisory Board (Board) in 2000 to support the responsibilities essential to the Health Resources & Services Administration (HRSA) Planning and Implementation Grant process, which became the Administration for Community Living (ACL) TBI State Partnership Grant. The Board is comprised of a variety of stakeholders representing individuals with a TBI, their family members, Commonwealth agencies and offices, and TBI programs and providers. The Department has continued to support the Board while utilizing the Administration for Community Living (ACL) grant and the Title V Maternal and Child Health Services Block Grant for other TBI programming.

### Pennsylvania Statistics:

- 543,288 people in PA live with brain injury related disabilities.
- 17,107 citizens ages 19 or younger have sports-related brain injuries, with over 15,000 seen annually in Emergency Departments in PA.
- 138,600 new injuries are sustained by adults and children each year.
- More than 85% of all TBIs involve lack of seatbelts, improper fit of a helmet, use of alcohol and drugs, or falls (especially in older adults).

BIAPA (2021)

# Leading Causes:

- 47% Falls
- 15% Struck by or against an object
- 14% Traffic accidents
- 9% Assaults
- 8% Unknown
- 7% Other

CDC (2021)

### Is TBI Preventable?

More than 85% of all TBIs can be prevented by one of the following:

- Wearing a seat belt. Seat belts are 57% effective in preventing traumatic and fatal brain injuries;
- Wearing a properly fitted helmet. Properly fitted helmets reduce the risk of brain injuries by 88%:
- Abstaining from alcohol and drugs. Over half of all brain injuries are related to alcohol and drug abuse; and
- Providing education on the risk of falling to older adults and providers supporting them. Nearly 20% of all older adult falls result in a brain injury.

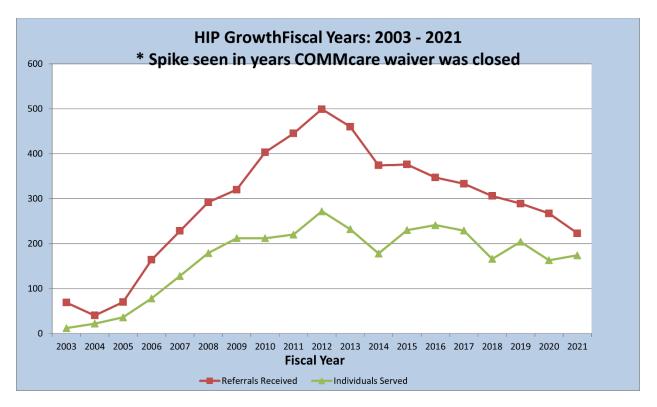
BIAPA (2020)

### **Head Injury Program**

The Head Injury Program (HIP) was created in 1988 by the Emergency Medical Services Act of 1985. The goal of the program is to help individuals with a TBI live as independently as possible in their homes and communities by providing funding for qualified individuals to receive head injury rehabilitation services. Enrolled individuals may receive up to 12 months or \$100,000 for rehabilitation services, followed by a maximum of six consecutive months or \$1,000 for case management to assist with transition out of the HIP. The goal of the program is to help individuals with a TBI live as independently as possible in their homes and communities. In December 2018, the age limit to apply for the HIP was decreased from 21 to 18 years of age.

HIP funding decreased from \$4.3 million in State Fiscal Year (SFY) 2019/2020 to \$4.1 million in SFY 2020/2021. In SFY 2021/2022, the approved budget was increased to \$4.3 million. Per House Bill 1459, \$250,000 of the HIP budget is to be allocated to Emergency Responder Mental Wellness and Stress Management. Therefore, 4.05 million will be used for the HIP in SFY 2021/2022.

Referencing the chart below, there were a total of 178 individuals served in SFY 2021, which increased from SFY 2020. In an ongoing effort to address the COVID-19 related health and safety concerns, providers continued to limit new admissions. Providers were also experiencing staffing issues that led to limits on residential, outpatient and home and community-based services. Although program growth stagnated in SFY 2021, it is expected to improve in SFY 2022. In August of 2021, re-enrollments began to be considered for individuals in need of additional rehabilitation.



# Administration for Community Living (ACL) Grants

In the first half of 2021, the Department continued partnerships with the Brain Injury Association of Pennsylvania (BIAPA) and Counseling and Rehabilitation Inc (C&R, Inc.) under the ACL TBI State Implementation Partnership Grant. BIAPA provided training services, technical assistance, and outreach for the Juvenile Justice and Older Adult service systems. C&R, Inc. provided NeuroResource Facilitation services. Although the ACL grant concluded on May 31, 2021, the Department received approval to utilize carry-over funding until December 31, 2021. The carry-over

funding was disbursed to BIAPA to complete projects. In the second half of 2021, the Department was awarded a new five-year ACL TBI State Implementation Partnership Grant. The Department chose BIAPA and Pennsylvania Coalition Against Domestic Violence (PCADV) as the selected Grantees. The new ACL grant began on August 1, 2021.

### • Domestic Violence:

As part of the new ACL grant, the Department partnered with PCADV to focus on the intersectionality between intimate partner violence and TBI. PCADV will create an education and outreach program targeted to domestic violence agencies and human service providers. The purpose is to strengthen the response to domestic violence survivors who may have a brain injury. In a recent survey, two thirds of the staff who are working with survivors, expressed that they felt comfortable incorporating brain injury information and resources when meeting with clients; conversely, only 24% felt resources were widely available and easy to connect survivors. The next step is to conduct focus groups among domestic violence program staff in urban, suburban, and rural areas to delve further into the results of the survey.

### NeuroResource Facilitation Program:

As part of the previous ACL grant, the Department partnered with C&R, Inc. to implement the NeuroResource Facilitation Program (NRFP). The NRFP focuses on helping PA residents with a TBI, ages 18 and older, and their family members to identify, navigate, and access brain injury resources, services and supports in their local area. The goal of the program is to maximize the health, independence, and overall well-being of individuals with a TBI statewide.

In 2021, COVID-19 continued to impact the NRFP. To prevent transmission, the program primarily provided services and outreach virtually or over the phone. In-person meetings did occur when requested and proper safety precautions were taken. Prior to the pandemic, the need for services was evident throughout the NRFP. As the pandemic emerged and continued in 2021, the need for services was exacerbated as individuals with TBI attempted to cope with and navigate through the myriad of COVID-19 related issues.

Between the roll out of NRFP on March 18, 2019, and the end of the ACL grant funding on May 31, 2021, 135 individuals were referred to the NRFP. Of those referrals, 80 individuals completed the NRFP; 17 individuals were referred to HIP; 29 individuals were unable to be reached by telephone or mail to begin the NRFP; four individuals decided not to participate; and five individuals had other circumstances that ended their NFRP services.

The ACL requested the collection of outcomes data, pre and post participation in the NRFP. The collected data included the NRFP participants' military involvement, housing status/living situation, employment status, and transition from an institutional setting. A comprehensive data collection tool, Data Collection for the Analysis of Outcomes of the NeuroResource Facilitation Program (NRFP), was used. In addition, NRFP evaluation data and demographic information from each participant was requested on a Satisfaction Questionnaire. The questionnaire was developed by the Department and provided to C&R, Inc. to use for the NRFP. The Satisfaction Questionnaire was sent to the participants at their last known address, accompanied by a self-addressed, stamped envelope to facilitate the return of the questionnaire. The details of the data collection and satisfaction questionnaires were provided to the Department in the Final Report.

Additionally, as part of the statewide focus of NRFP and with consideration for the consequences of COVID-19, a statewide <u>Resource Manual: Addressing the Needs of Pennsylvanians with Traumatic Brain Injuries</u>, was finalized in March 2021. The manual is

organized by each of the 67 counties in PA. It contains information related to the needs identified by NRFP participants and those widely reported in the periodical literature on TBI, including advocacy organizations, brain injury rehabilitation programs, brain injury support groups, county assistance agencies, domestic violence resources, food pantries, hospitals, rehabilitation hospitals, housing, mental health and substance abuse services, skilled nursing facilities, transportation, and vocational resources. With the implementation of the new ACL grant in August of 2021, the Department partnered with BIAPA to continue the NeuroResource Facilitation Program.

### Juvenile Justice Technical Assistance and Training:

In 2021, BIAPA and the Department, through the ACL grant, continued to work on providing training and technical assistance to existing juvenile justice service providers in PA and conduct outreach to additional juvenile justice providers/professionals. The purpose of the outreach was to offer technical assistance including training and consultation related to identifying youth with a history of brain injury through screening, providing/referring for neurocognitive testing, and facilitating potential resources for youth with brain injury. Such assistance continued virtually, despite COVID-19, to the following: the Bureau of Juvenile Justice Services, Butler County Probation, Adelphoi Village, George Junior Republic, the Philadelphia Justice Assessment Center, Philadelphia Juvenile Justice Services Center, Pennsylvania Partnership for Juvenile Services, and the National Partnership for Juvenile Services. A total of 24 juvenile justice trainings provided to 570 individuals throughout 2021. With the implementation of the new ACL grant in August of 2021, the Department partnered with BIAPA to continue the Juvenile Justice technical assistance and training.

## • TBI Education, Training, and Outreach for Older Adult Populations:

In 2021, BIAPA, through the ACL grant, provided outreach and training to increase awareness of brain injury amongst individuals working within the older adult system. Nine trainings were virtually conducted for professionals working with older adults. With the implementation of the new ACL grant in August of 2021, the Department partnered with BIAPA to continue the TBI education, training, and outreach for the Older Adult population.

#### Tele-rehab Pilot:

Under the 2018-2021 PA TBI Board State Action Plan, a Telehealth workgroup was formed to advise the Department regarding the utilization of telehealth services to deliver remote Cognitive Rehabilitation Therapy (CRT). The Department had the opportunity to pursue the recommendation of the Telehealth workgroup to perform a program evaluation project under its 2018-2021 ACL State Partnership Program TBI grant. The Department obtained approval from ACL to provide education and training to HIP providers on delivering CRT remotely. Beginning in February of 2020 27 HIP clients from four PA brain injury rehabilitation centers were recruited to participate in the program evaluation project, which concluded on May 31, 2021.

The program evaluation project was designed to evaluate the feasibility of the provision of CRT services through either a combination of in-person and tele-rehab delivery, or through virtual delivery alone. The project included the costs of providing equipment, internet connectivity, and training resources necessary to clients. In addition to evaluating the costs associated with providing CRT service by remote delivery mechanism, the evaluation also examined users' experience—both therapists and clients—with regards to system usability and satisfaction with service. Both quantitative survey results and qualitative responses to open-ended responses to prompts about user experiences were evaluated.

Although there were a few barriers that were identified, the findings support the feasibility and potential benefits of CRT provided via remote delivery. The full report is available by contacting Erika Pae at the PA Department of Health.

### Opioids Project:

As noted in last year's report, BIAPA, with funding and direction from the Department, developed a course on the intersection of brain injury and opioids misuse. The course is designed primarily for substance abuse providers and can be adapted for other audiences, including brain injury providers. Two 8-hour courses were delivered, one with 80 attendees and one with 59 attendees. BIAPA also provided three trainings through the Philadelphia Department of Behavioral Health and Intellectual Disabilities targeted to professionals who work with individuals with substance abuse. Topics included basic brain injury education, screening for brain injury and brain injury resources. An extensive list of outreach contacts was developed for future work on this topic.

### • Brain Injury Ambassador Program:

The PA Brain Injury Ambassador Program, a collaboration between the Department and BIAPA, was conceptualized, developed, and implemented during 2021. It is geared toward families and caregivers of persons with brain injury coming through in-patient trauma and rehabilitation hospitals throughout PA. The goal of this program is to connect with families early in the recovery process, to let them know that there is hope and help available after brain injury. Families were referred by liaisons from participating rehabilitation facilities in their region. Seven trained Brain Injury Ambassadors conducted outreach to the referred families to share information about brain injury services and supports they may need in the future. Ambassadors establish a communication method so families and caregivers can receive the BIAPA newsletter, and information about the Brain Injury Resource Line (BIRL), which they can call if help is needed in the future.

Eight inpatient rehabilitation hospitals participated in the program, with potential for expansion. From those rehabilitation hospitals, 91 referrals were received through the end of 2021. While the original intent was to meet families in person, given the pandemic, all contacts have been virtual since the implementation in May 2020. This will be maintained based on the success and efficiency of these communications. The program received an award for Excellence in Programs from the Brain Injury Association of America at their annual Leadership Meeting in November 2021.

#### Veterans Task Force:

The Department provided funding for BIAPA to develop and convene a short-term task force to bring together stakeholders from the Veterans community and the Brain Injury community, who share the goal of effectively serving Veterans with brain injury. The group met three times, shared resources from their respective systems, and produced a shared resource guide. The guide was submitted to the Department for review, with the intent of sharing it with task force members and their networks.

#### • Brain Injury Resource Line On-line Manual Development:

The Department provided funding for BIAPA to develop an on-line resource manual to assist BIRL volunteers to identify resources to meet the needs of callers. Content was based on an existing manual in Word format and was expanded considerably through this effort. The format allows for editing in real time and in a dynamic fashion to eliminate the need for updating versions.

### **Advisory Board Workgroups**

The following workgroups were developed to address goals that were identified in the State Action Plan:

- Education and Resource Facilitation Workgroup This workgroup focuses on Goal 1 and 2 of the State Action Plan. Goal 1 is to increase knowledge and awareness of available brain injury education, training, and technical assistance among workforce likely to serve individuals with brain injury. Goal 2 is to increase knowledge and public awareness of available opportunities for brain injury resource facilitation.
  - o In 2021, the workgroup discussed stakeholders and professionals in health and human services that would benefit from receiving information about brain injury. They also continued discussions related to tailoring educational offerings and resources for each audience. For example, a teacher needs different information than a healthcare provider. With most of the educational materials and resources directed towards professionals and community members interacting with individuals with a brain injury, the group made the determination to include individuals with brain injury in the development of all educational materials or resources. The workgroup also determined the need to identify strategies to develop a culture of normalizing and talking about brain injury. The workgroup began compiling a list of currently available resources related to TBI and will continue this work throughout the next year.
- Systems Workgroup This workgroup focuses on Goal 3 of the State Action Plan, which
  is enhancing service and support systems for individuals with brain injury and their
  families.
  - MA Special Needs Units: The group had a discussion with Katrina Becker, Special Needs Unit supervisor with the Department of Human Services (DHS). Prior to COVID-19, Ms. Becker stated full day trainings were conducted for Special Needs Coordinators, Case Managers, MCO Leadership. Now, they conduct virtual quarterly meetings with focused topics. The group discussed how to embed brain injury training/content into the Special Needs Coordinators' initial and on-going trainings, as well as reviewing the current brain injury training that is provided through BIAPA. Ms. Becker stated that although the original Commonwealth Special Needs Unit still exists under DHS, Office of Long-Term Living (OLTL), Community HealthChoices Program (CHC), CHC contracts with Managed Care Organizations (MCO), which are required to have a stand-alone Special Needs Unit and their own Case Managers/Social Workers. The Commonwealth Special Needs Unit has oversight over the MCO Special Needs Unit, and the trainings they offer are for the MCO Special Needs Units. Dr. Douglas Jacobs, from DHS, is spearheading a state-wide resource and referral tool. It was to be used by all MCOs and was originally planned to be a state resource but is now planned to be connected to the MCO's platform.
    - DHS's Office of Developmental Programs' (ODP) utilizes specialized tools, developed by the Life Course Framework, to help individuals and families of all abilities and all ages develop a vision for a good life, think about what they need to know and do, identify how to find or develop supports, and discover what it takes to live the lives they want to live. This could also tie in with the Vocational Rehabilitation Pre-employment Transition services(transition planning for youth age 14-21) and be used as a model for meeting the needs of those with brain injury. It was suggested that perhaps every person with brain injury needs to request a Special Needs Service Coordinator.

- HIP Provider Profiles: The group also focused discussions on the needs related to the option of providing services via tele-rehab in addition to or instead of providing services in-person. The tele-rehab pilot project determined this was a viable way of delivering services, but there were several potential barriers identified. The HIP has made the decision to allow CRT services to be delivered via a virtual format, though there was a concern voiced over the benefits and logistics to seeing clients face-to-face as well as via tele-rehab. The group discussed concerns regarding access to services and service delivery options, and the creation of more detailed provider profiles to aid participants in choosing the provider who can best meet their HIP service needs. The Department has concerns about whether providers would have to change their profiles with staff changes. There was a suggestion to make it a training function with Pre-Enrollment Coordinators so they can discuss the needs with the Department on a case-by-case basis. However, this only includes people are referred to the program. The possible issue is that some referrals are not made because the referrer knows there are no brain injury resources in the person's area. It was suggested to poll providers to gather additional information and the best ways to provide additional education to acute medical/acute rehab staff about the Department programs that are available.
- Health Equity Workgroup This workgroup focuses on Goal 4 of the State Action Plan, which is to increase knowledge and awareness of the Pennsylvania Traumatic Brain Injury Advisory Board to increase stakeholder diversity and representation and foster greater collaboration.
  - The workgroup developed and distributed a survey to the board members to identify the demographics of the current board. The group reached out to OLTL and obtained demographics data about those with brain injury that are accessing services, to develop a plan for developing comparable representation on the advisory board (Diversity, Age and Ethnicity). Recommendations included:
    - The Board must diversify so it can represent the interests of those who have brain injuries.
    - Recruitment efforts need to be made to meet the goal of greater diversity.
    - Beyond diversification, the Board needs to determine other ways to learn more about the needs of those who have brain injuries.
    - Investigate the transportation options for people to access Board meetings.
    - Explore the possibility of having the location of the TBI Advisory Board Meetings rotate to different counties so more people from different areas can join and attend.
    - Offer virtual attendance for all meetings to offer access to all people in all areas.
    - Provide a diversity training for the Board members.
    - Gain more of an understanding as to what services are available to different people in different areas (Ex. medical care in Potter County versus Philadelphia County).

The goal of CHC is to serve more people in the community in order to give them the opportunity to work, spend more time with their families, and experience an overall better quality of life. CHC was developed to enhance access to and improve coordination of medical care and to create a persondriven, long term support system in which people have choice, control, and access to a full array of quality services that provide independence, health, and quality of life. Long Term Services and Supports (LTSS) help eligible individuals to perform activities in their home such as bathing, dressing, preparing meals, administering medications and to remain involved in their community.

CHC was fully implemented statewide in January of 2020, following a three-year implementation phase that began in January 2018 in a fourteen-county area in the Southwest, then in January 2019 a five-county area in the Southeast and then in January 2020, the 48 counties in the Northwest, Northeast, and Lehigh/Capital area. CHC is a Medicaid managed care program that includes physical health benefits and long-term services and supports (LTSS). The following may qualify for CHC: individuals who are 21 years of age or older and dually eligible for Medicare and Medicaid; individuals who are 21 years of age or older and eligible for Medicaid (LTSS) because they need the level of care provided by a nursing facility; and individuals currently enrolled in the LIFE Program only if they expressly select to transition from LIFE to a CHC MCO. The following individuals are not eligible for CHC: people receiving long-term services and supports through the OBRA waiver and are not nursing facility eligible; individuals who do not meet the Medicaid financial eligibility criteria and individuals who reside in a state veteran's home.

In 2021, the COVID-19 pandemic continued to cause significant barriers to CHC participants with a TBI and their families receiving services and service providers delivering services. As a COVID-19 prevention measure, most congregate settings continued to be closed. To mitigate any possible health and safety risk to the participants attending those programs, services had to be provided in their homes. As service needs increased, the staff available to provide those services decreased. Providers faced ongoing staff shortages, which created numerous hurdles to provide critical services daily. These staffing issues impacted the whole continuum of health care services for participants at the state level and nationally. OLTL, the CHC MCOs, service providers stepped up to meet participants' needs. OLTL allowed some services to be provided virtually and partnered with MCOs to maximize the number of vaccinated participants through outreach, education, and hosting vaccination clinics. OLTL also worked to disburse and monitor the American Rescue Care Plan Act (ARPA) funds to some providers in the CHC program.

The MCOs participating in CHC include:

### MANAGED CARE ORGANIZATIONS

The selected offerors were announced on August 30, 2016.

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www.AmerihealthCaritasCHC.com



www.PAHealthWellness.com

UPMC Community HealthChoices

www.upmchealthplan.com/chc



DHS - OLTL will continue to provide information about relevant CHC topics through various means on specific topics, narrated training segments and statewide provider assistance events. Information on CHC is located on DHS's website at: www.HealthChoices.pa.gov.

DHS - OLTL continues to provide ongoing CHC updates at stakeholder's meetings and other webinars as requested. OLTL has both a Provider and Participant Helpline as resource information contacts. The following resources are available:

#### RESOURCE INFORMATION

CHCLISTSERV//STAYINFORMED: http://listserv.dpw.state.pa.us/oltl-community-healthchoices.html

COMMUNITY HEALTHCHOICES WEBSITE: www.healthchoices.pa.gov

MLTSS SUBMAAC WEBSITE:

 $\underline{www.dhs.pa.gov/communitypartners/information for advocates \underline{a}\underline{n}\underline{dstakeholders}/mltss$ 

EMAIL COMMENTS TO: RA-PWCHC@pa.gov

OLTL PROVIDER LINE: 1-800-932-0939

OLTL PARTICIPANT LINE: 1-800-757-5042

INDEPENDENT ENROLLMENT BROKER: 1-844-824-3655 or (TTY 1-833-254-0690)

or visit www.enrollchc.com



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## **Brain Injury Association of Pennsylvania**

• BrainSTEPS - Child & Adolescent Brain Injury School Re-Entry Program:

Website: <a href="http://www.brainsteps.net/">http://www.brainsteps.net/</a>
Phone Number: 724-944-6542

BrainSTEPS (Strategies Teaching Educators, Parents, and Students) Brain Injury School Reentry Consulting Program is a statewide educational initiative, delivered through all 29 Intermediate Units, to assist PA schools in creating appropriate educational plans for students, following an acquired brain injury (ABI). It was created by the Department in 2007 and is jointly funded by the Department and the PA Department of Education, Bureau of Special Education via the Pennsylvania Training and Technical Assistance Network. BrainSTEPS provides the following support to PA schools, students, and families:

- Identification of students with brain injury
- School re-entry planning
- Educational plan development, including IEP/504 Plan support, academic adjustments/ accommodations, and strategy selection
- Teacher, peer, and family training
- Annual monitoring of student until graduation
- Family support and resource sharing
- Return to Learn concussion management
- Facilitation of communication between healthcare provider, school staff, and family

In 2021, BrainSTEPS received a total of 315 referrals. The 30 BrainSTEPS teams provided 269 consultation hours to develop 302 person-centered plans.

#### BIAPA Public Awareness:

Brain Injury Resource Line (BIRL) #1-800-444-6443

The BIRL is maintained by the BIAPA. It is designed to give resource information to all who call. The BIRL is staffed by trained volunteers who work as a team and participate in ongoing training to increase their capacity to assist callers. The team of volunteers participates in an in-person training annually at the BIAPA conference.

## Support Groups:

As highlighted in previous years, brain injury support groups are the front-line tool of affiliation for individuals with brain injury and their families. BIAPA maintains contact with these support groups to provide information and support as needed and works with individuals to start new groups in the communities where they live.

Due to ongoing concerns and COVID-19 restrictions, the groups did not hold in-person meetings, but offered virtual meetings. BIAPA provided technical assistance to help support groups continue to operate virtually. A listing of groups meeting virtually was posted on the BIAPA website and a link to the list is included in each month of the BIAPA e-newsletter. BIAPA continued to offer their virtual support group (through video conference) that is open to survivors and their supporters statewide.

### **PA Brain Injury Coalition**

The Pennsylvania Brain Injury Coalition is made up of a group of volunteers who work together with the Brain Injury Legislative Caucuses to address the needs of individuals in Pennsylvania living with brain injury related issues.

The priorities for 2022 include:

- Access to post-acute Neuro-Rehabilitation services
- Educating and training healthcare professionals about people who have unintentional opioid overdose resulting in lack of oxygen causing brain injury
- Providing systems change for people with brain injury in criminal justice
- Ensuring appropriate educational supports for children with brain injury including concussion
- Supporting the use of tele-rehab as a method of increasing access to Neuro-Rehabilitation services
- Assuring access to Supported Employment services for adults with brain injury
- Identifying and supporting populations where brain injury is over-represented and underserved (for example: individuals experiencing homelessness, mental health issues, domestic violence, substance abuse)
- Encouraging legislators to join the Brain Injury Legislative Caucuses

# PATS Concussion Education Program

Through a grant awarded by the Department, the Pennsylvania Athletic Trainers' Society (PATS) continued to identify, address, and eliminate health disparities in the populations served by Title V, specifically concussion education for youth in 6<sup>th</sup> grade and under who participate in sports and individuals affiliated with these youth sports. Due to the COVID-19 pandemic, presentations were limited due to government restrictions.

The PATS work plan provides educational trainings throughout all of Pennsylvania (PA), including rural and urban areas, both of which experience significant health disparities. By taking a statewide approach, PATS is educating anyone affiliated with the TBI population and using best practices in concussion identification and management. This will result in more health equity for all young athletes in PA. The PATS plan will help all young athletes with concussions achieve better health outcomes and eliminate health disparities.

## Highlights:

PATS collaborated with Sports Safety International (SSI) to maintain the **PATS Concussion Toolbox App** 

- The FREE App is available in IOS and Android formats by entering PATS Concussion Toolbox in the AppStore or Google Play.
- The PATS Concussion Toolbox App is designed for coaches, parents and athletes participating in youth sports throughout the Commonwealth.
- The App includes ConcussionWise training courses for coaches, parents and athletes and includes FAQs, Concussion signs and symptoms and information about PATS and Athletic Trainers.
- PATS Concussion Toolbox analytics from July 2020 to June 2021: there were 214 downloads for a total of 241 app users. The most popular aspects of the app were the Signs and Symptoms, as well as the ConcussionWise Educational Program for coaches, parents, and athletes.
- PATS, in conjunction with Commonwealth Media Services (CMS) and the Department, completed a public service announcement and marketing campaign in August 2021. This campaign was developed to reach parents and coaches of students in 6<sup>th</sup> grade or less prior to the beginning of the fall sports season. The multimedia campaign focused on two things: Promoting the PATS Concussion Toolbox App and promoting PATS Athletic Trainers as a resource for education about concussions throughout the Commonwealth.
- Analytics from the Commonwealth Media Services (CMS) Multi-media Campaign July through August 2021: 13.3 million impressions and 100,000 website clicks, which is a return on investment (ROI) of 8 to 1 ratio that calculates to an added value \$120,200 for this campaign.

Additionally, in partnership with SSI, PATS provided virtual concussion education:

- **39** total presentations by four different ConcussionWise Instructors.
- **609** attendees, including **69** coaches, **40** parents and **500** athletes, participating in youth sports in 6<sup>th</sup> grade and below were educated about concussions.

### The Pennsylvania Shaken Baby Syndrome (SBS) Prevention Program

(http://www.health.pa.gov/shakenbabyprogram #1-717-772-2763) - The SBS Prevention Program is an injury prevention program supported by the Department. PA Hospitals and birthing centers are required per Act 2001-176, to provide parents with specific educational materials related to the risks and consequences of shaken baby or infant head trauma. The Department oversees the distribution and use of these materials. The Department continues to provide technical assistance to hospitals and birthing centers concerning the requirements of Act 2001-176.

# Council on Brain Injury (CoBI)

In a continued response to the pandemic, 2021 saw CoBl's small group of volunteers turn their focus to supporting the CoBl community through virtual connections and grants.

In 2021, CoBI awarded both PA support groups and organizations from the tri-state area nearly \$40,000 in grants. Awardees are listed at the end of this report.

ReDiscoverU, CoBI's adult evening school style, virtual program met weekly throughout 2021 on Mondays from 6PM – 7:30PM. Classes covered a variety of topics-of-interest ranging from Tai Chi to

Songwriting to Share Nights. Average number of participants per class, which were all individuals with brain injuries, was 12-15.

CoBI's Educational program, CoBI Clinical Forum, moved to a virtual format and offered three free trainings geared toward professionals. CoBI's Clinical Forums are free of charge and also help individuals certified by the Academy of Certified Brain Injury Specialist earn their necessary contact hours. The topics were Disorders of Consciousness; Telehealth; and Caregiver Needs. The CoBI Annual Conference did not take place in 2021 due to the pandemic.

In September of 2021, CoBI held their annual golf tournament, with great success. David's Drive is a critical fundraiser that helps support CoBi's efforts throughout the year The annual John Savelloni All Abilities Golf Clinic also returned this year and was expanded to include a putting clinic.

This year's CoBI Awards, which were given during David's Drive, went to Doctor Christina Master from Children's Hospital of Philadelphia, for her ongoing work in pediatric brain injury and Storm Harbor Equestrian/Slippery Rock University for their equestrian and aquatics programs for individuals with brain injury.

CoBI was fortunate to have the support of many sponsors and donors in 2021. CoBI is especially grateful for the support they received from Piazza Subaru of Limerick, as they were chosen again as the hometown charity, during the Share the Love campaign. Other sponsors and donors were USI Insurance, Alliant Employee Benefits, Oliver Heating & Cooling, Astor Weiss, Kaplan & Mandel, LLC, and Collage Rehabilitation Partners.

# CoBI in Action—Grants 2021

- Allegheny Health Network: Brightway Health Research Project to further develop an app to help individuals and families after TBI.
  - Website: https://www.brightwayhealth.org/about-us
- **Brain Injury Association of PA**: Scholarships for survivors and families for the annual conference and support for a survivor retreat.
  - Website: www.biapa.org
- Bryn Athyn College: Concussion Research and Education Project
  - Website: <u>www.brynathyn.edu</u>
- Camp Cranium: "Camp-in-a-Box", virtual camp for children with brain injury.
  - Website: www.campcranium.org
- **Fighting Back Scholarship Program**: Fitness Scholarships, including virtual training, for Veterans.
  - Website: www.fightingbacksp.org
- Harcum College: Support its COTA preceptor program to include brain injury settings
  - Website: www.harcum.edu
- Hope After Head Injury: A new microphone for podcasts!
  - Website: www.hopeafterheadinjury.com
- Hope Springs Equestrian: Equestrian opportunities for individuals with brain injuries
  - Website: http://hope-springs.org/
- Magee Rehabilitation Hospital Foundation: Supporting the art therapy program.
  - Website: www.mageerehab.org

- Mind your Brain Foundation: Support for Wellness Wednesdays.
  - Website: www.mindyourbrainfoundation.org/
- **Nancy's House**: A phone-in support group targeting families/caregivers of individuals with brain injuries.
  - Website: www.Nancys-house.org
- Patrick Risha CTE Awareness Foundation
  - Website: www.stopcte.org
- University of Pittsburgh, "Pitt Synapse Program": Buddy Program run by University of Pittsburgh students.
  - Website: www.pittsynapse.org
- **Project Green Heart Foundation**: Creating care baskets and information for families with adolescents in the hospital with brain injuries. Created by a family who has been there.
  - Website: <a href="https://www.projectgreenheartfoundation.org/">https://www.projectgreenheartfoundation.org/</a>
- ReDiscoverU: Virtual classes on all kinds of topics—from yoga to art to rock climbing.
  - Websitewww.councilonbraininjury.org
- RESTART your Life/RENEW your Mind: Survivor Nights Out, tech upgrade and more.
  - Website: www.restartlife.net
- Salus University: Assessment equipment for the speech language pathology free clinic and treatment group.
  - Website: www.salus.edu
- **Slippery Rock University**: Equestrian/aquatics program for individuals with brain injuries, run by SRU's Therapeutic Recreation students and faculty.
  - o Website: www.sru.edu
- The Jazz Sanctuary, Inc: Performances and events for individuals with brain injuries, including jazz bucket drums and Tai Chi.
  - Website: www.thejazzsanctuary.com

For additional information or inquiries regarding Brain Injury services in Pennsylvania, please contact or go online at:

PA Dept of Health Head Injury Program (HIP) #1-717-772-2763 (8:30 AM – 4PM)

https://www.health.pa.gov/topics/programs/Pages/Head-Injury.aspx

PA Dept of Health NeuroResource Facilitation Program (NRFP) #1-717-772-2763 (8:30 am – 4:00 pm)

http://neuroresource.health.pa.gov

**Brain Injury Help Line #1-866-412-4755** 

Brain Injury Resource Line (BIRL) #1-800-444-6443

BIAPA #1-866-635-7097

www.biapa.org

Disability Rights Pennsylvania #1-800-692-7443

www.disabilityrightspa.org

PA Health Law Project #800-274-3258

www.phlp.org

The Traumatic Brain Injury Advisory Board meetings are open to the public. If you would be interested in attending a meeting, please contact Erika Pae, Dept. of Health: epae@pa.gov; # 717-772-2763.