Traumatic Brain Injury Program

WVU Center for Excellence in Disabilities

Courtney Pride, LSW TBI Social Worker



A part of West Virginia University & WVU Health Sciences Center

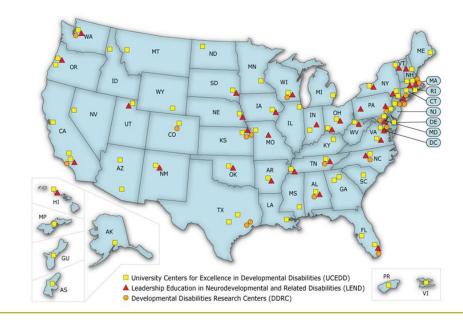




Part of a National Network



UCEDDs, LENDs, and DDRCs



WVU CED's Role:

Education and training to University students in multiple disciplines to prepare a workforce that is able and willing to serve persons with disabilities

Technical assistance to individuals with disabilities and direct care providers who serve them to enhance their skillset and improve service quality

Gap filling direct services and supports in an effort to improve availability and acceptability of services for West Virginians

Dissemination of information about the status of disabilities services in West Virginia and the nation

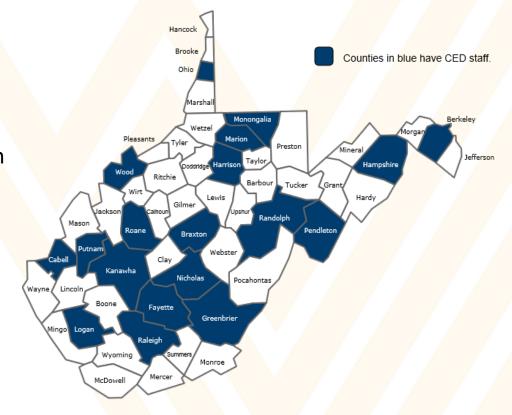
Research activities conducted in collaboration with partners, to improve services and policies related to individuals with disabilities and their families.





About WVU CED

- •Serves individuals with disabilities across the life span in all 55 counties
- •7 Programs
- •4 Clinics
- Approx. 90 Staff
- •Multiple state and federal partners





Brain Facts

Your brain is 73% water and only takes 2% dehydration to affect your attention, memory, and other cognitive skills.

Uses 20% of the body's blood and oxygen

The average brain generates 48.6 thoughts per minute; which is about 70,000 thoughts per day!

When awake, the brain produces enough energy to power a small lightbulb

Is not fully developed until our mid 20's.



Traumatic Brain Injury Overview

The Center for Disease Control and Prevention defines
 Traumatic Brain Injury (TBI) as a disruption in the normal function of the brain that can be caused by a bump, blow, or jolt to the head, or penetrating head injury.

• In West Virginia, TBI also includes individuals who have anoxia due to near drowning.



Traumatic Brain Injury Severity

Mild (Concussion)

 Symptoms may include: loss of memory, fatigue, confusion, disorientation, difficulty concentrating, headache, dizziness, blurry vision, nausea and vomiting

Moderate

 Symptoms may include: slurred speech, fatigue, loss of consciousness, repeated nausea or vomiting, numbness or tingling in arms and/or legs, loss of coordination

Severe

 Symptoms may include: loss of consciousness from several minutes to hours, clear liquid draining from ears or nose, inability to waken from sleep



PHYSICAL How a Person Feels Physically

COGNITIVE How a Person Thinks

Headache/Pressure
Blurred vision
Dizziness
Poor balance
Ringing in ears
Seeing "stars"
Vacant stare/Glassy eyed

Nausea
Vomiting
Numbness/Tingling
Sensitivity to light
Sensitivity to noise
Disorientation
Neck Pain

Feel in a "fog"
Feel "slowed down"
Difficulty remembering
Difficulty concentrating/easily distracted
Slowed speech
Easily confused

EMOTIONAL How a Person Feels Emotionally

Inappropriate emotions
Personality change
Nervousness/Anxiety
Feeling more "emotional"

Irritability Sadness Lack of motivation

SLEEP/ENERGY

How a Person Experiences Their Energy Level and/or Sleep Patterns

Fatigue Excess sleep Trouble falling asleep Drowsiness Sleeping less than usual





TBI Statistics

1.7-3.8 million new TBI's each year

5.3 million currently living with disabilities as a result of TBI

69,000+ die each year (roughly 190/day)

220,000+ are hospitalized each year



TBI Statistics

- TBI has often been referred to as the silent epidemic
- 2nd most prevalent disability in the US
- 80-90% are considered mild
 - Even mild injuries can be life altering and cause long term disability
- Remaining 10-20% are considered moderate to severe



TBI in West Virginia



 411 WV residents died due to traumatic brain injuries in 2015, representing 20% of all injury related deaths.

763 WV Residents
 were hospitalized for TBIs
 in 2015, 25% of injury
 related hospitalizations.

Causes

- Motor Vehicle (33% in WV)
- ATV Accidents (10% in WV)
- Falls (27% in WV)
- Being struck by or against something
- Assaults and Fights
- Intimate Partner
 Violence/Domestic Violence
- Blast Injuries
- Gun Shot Wounds
- Sports Injures

Risk Factors

- Highest incidence:
 - Males all ages (1.5-2x more likely)
 - Children under 4
 - Age group 15-24
 - Adults over 60
- History of TBI
 - 3x more likely to have a 2nd one
 - 8x more likely to have a 3rd one

At-Risk Populations for Brain Injuries

- Victims of Intimate Partner Violence
- Military/Veterans
- Individuals with Substance Use Disorder
- Individuals within the Criminal and Juvenile Justice Systems
- Individuals Experiencing Homelessness

TBI & Intimate Partner Violence

- Intimate Partner Violence (IPV) refers to physical, sexual, and psychological aggression by a current or former intimate partner
- 1 in 5 women and 1 in 7 men have experienced severe physical violence from an intimate partner in their lifetime.
- Survivors of IPV who have a TBI are more likely to be diagnosed with:
 - PTSD
 - Insomnia
 - Depression
 - Worse overall health



TBI & Military/Veterans

- More than 400,000 U.S. service members were diagnosed with a TBI between 2000-2019.
- TBI experience multiple health condition in this demographic including:
 - PTSD
 - Headaches
 - Irritability
 - Depression

These conditions often lead to long-term mental and physical health problems that can impair employment, family relationships, and reintegration into home communities.

Substance Abuse and Brain Injury

Natural History of TBI to Age 25 from the Christchurch Birth Cohort (McKinlay, et al., 2008)

- Those hospitalized with 1st TBI before age 6
 - 3x more likely to have a diagnosis of either alcohol or drug dependence by age 25
- Those hospitalized with 1st TBI between ages 16-21
 - 3x more likely to be diagnosed with drug dependence
- TBI highly associated with likelihood of arrest



TBI & Criminal Justice: Prevalence

- A meta-analysis found the prevalence in the justice population to be 60.25% (Shiroma, Ferguson, & Pickelsimer, 2010) vs. 8.5% of the general population with reported history of TBI (Wald, Helgeson, & Langlois, 2008)
- Meta-analysis found prevalence of brain injury in juvenile justice system to be an average of 44% (Dijkers & Seger, submitted)

TBI & Homelessness

• Compared to general population, people who experience homelessness are 2-4 times more likely to have any type of TBI and up to 10 times more likely to have a history of a moderate to severe TBI.

TBI & Homelessness

- People who experience homelessness and have a history of TBI have worse overall physical and mental health and are more likely to report the following:
 - Violence and/or trauma during childhood
 - Substance use
 - Suicidal thoughts

Importance of Screening (lifetime history)

- 42% of persons who indicated they had incurred a TBI as defined by the CDC did not seek medical attention (Corrigan & Bogner, 2007)
- Research indicates that a person's lifetime history of TBI is useful for judging current cognitive and emotional states, particularly behavior associated with the executive functioning of the frontal parts of the brain (e.g., planning, impulsivity, addiction, interpersonal abilities)
- Brain injury increases risk for problem behaviors (Williams, Mewse, Tonks, Mills, Burgess & Cordan, 2010

TBI Screening

- Multiple TBI Screening tools available
- Ohio State University Traumatic Brain Injury Identification Method
 - Structured interview designed to elicit lifetime history of TBI.
 - Avoids misunderstanding about what a TBI is by eliciting injuries, then determining if altered consciousness occurred.
 - Provides more information than simple "yes/no"



Have you had a Traumatic Brain Injury?

Answer the questions below using Step 1 of The Ohio State University Traumatic Brain Injury Identification Method Screening Tool below:

- In your lifetime, have you ever been hospitalized or treated in an emergency room following an injury to your head or neck? Think about any childhood injuries you remember or were told about.
- In your lifetime, have you ever injured your head or neck in a car accident or from crashing some other moving vehicle like a bicycle, motorcycle or ATV?
- In your lifetime, have you ever injured your head or neck in a fall or from being hit by something (for example, falling from a bike or horse, rollerblading, falling on ice, being hit by a rock)? Have you ever injured your head or neck playing sports or on the playground?
- 4. In your lifetime, have you ever injured your head or neck in a fight, from being hit by someone or from being shaken violently? Have you ever been shot in the head?
- 5. In your lifetime, have you ever been nearby when an explosion or a blast occurred? If you served in the military, think about any combat or training-related incidents?

If you answered **YES** to any of these questions above, you may be eligible to receive services from our program.



All services are free of charge to anyone who:

- Is a current West Virginia resident
- Provides medical documentation of a diagnosed traumatic brain injury

Types of Services

- Resource facilitation from our regionally located Certified Brain Injury Specialist Social Workers
- Coordination of free neuropsychological evaluations to identify functional deficits if determined to be beneficial for service plan
- Assistance with applications to request financial assistance for goods and services to improve quality of life including:
 - Medical/vision/dental services
- Adaptive equipment or assistive technology
- · Home modifications
- Therapy services (physical, speech, cognitive, occupational)
- · Other items to promote independence

Who can make a referral?

Self Family Friends

Physicians Clients Patients

How to make a referral

Call toll free 877-724-8244
Visit tbi.cedwvu.org, and click the orange button on the bottom of the page



The Taumatic Brain Injury Services are supported in part by the West Virginia Department of Health and Human Resources, Bureau for Behavioral Health and Health Kacilities and the U.S. Department of Health and Human Services, Administration For Community Living Grant Number 90TBSG0038-01-00. Grantees undertaking projects with government sponsorship are encouraged to express freely their findings and conclusions. Points of view or opinions do not, therefore, necessarily represent official ACL policy. All printed materials are available in alternate formats upon request. WU is an ECO/Affirmative Action Employer—Minority/Female/Disability/Vetera. Disability-Vetera. Disability-Vetera.

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Traumatic Brain Injury Screening





Month -	Total number of TBI Screens 🔻	Positive TBI Screens 🕓	If positive, age 21 and under ✓	Age 22-59 🔻	60 and older 💟	TBI Program referrals 🔽
January	0	0	0	0	0	0
February	25	19	0	19	0	0
March	66	33	0	33	0	0
April	46	27	0	26	1	0
May	55	37	1	36	0	0
June	59	37	1	36	0	
July	45	34	0	34	0	
August						
September						
October						
November						
December						
Tota	l 296	187	2	184	1	0

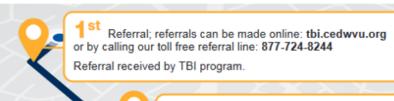
Traumatic Brain Injury Services

- WVU CED is West Virginia's designated lead agency for coordination of services for West Virginians with TBI.
- Variety of services and resources offered who have experienced a TBI and their caregiver

Eligibility of Services

All services are free of charge to anyone who:

- Is a current West Virginia resident
- Provided medical documentation of a traumatic brain injury (TBI) to TBI Intake Coordinator



3rd TBI program mails referral packet that contains:

- Introduction letter
- · TBI brochure and Disability Rights WV brochure
- · Release of Information (ROI) to Receive Services
- Release to an External Agency (ROE) forms (Provides release to medical facility for us to obtain your medical records)
- Postage Paid Envelope

Once the ROI and ROE are received, TBI program requests medical records.

6th Once medical records are received, initial intake scheduled.

TBI program will call you about the referral and discuss our services.

7th Social worker sets up a social needs assessment and begins facilitating resource facilitation.

Return
ROI and ROE
in the Postage
Paid Envelope to
the TBI program
with the needed
signatures and
permissions.
Clients can also
include a copy
of their medical
records with the
TBI diagnosis, if
they have it.

<u>Program Manager</u> Cortland Nesley

Intake Coordinator
Carrie Cobun-Stark

<u>Program Assistant</u> Matthew Ryan

Outreach Coordinator
Jeremy Dixon

Center for Excellence in Disabilities



Resource Coordinators

Delena Arthur

Michelle Earl

Sharlene Liberto

Angela Morales

Courtney Pride

Hancock Brooke Ohio 1arshal Monongalia Berkeley Wetzel Marion Pleasants Preston Minera Jefferson Taylor Harriso Hampshire Ritchie Barbour Grant Tucker Lewis Hardy Gilmer lackson Upshur Randolph Mason Roane Pendleton Braxton Putnam Webster Clay Kanawha Nicholas **Pocahontas** Lincoln Wayne Boone Favette Greenbrier Mingo Logan Raleigh Wyoming Monroe Mercer McDowell

Resource Coordination & Navigation

- Person centered planning
- Social Needs Assessment performed with regionally located Social Workers
- Create a plan to address any immediate needs, improve quality of life, and promote independence.

Neuropsychological Evaluations



Evaluation that identifies strengths/weaknesses and create a comprehensive plan of strategies to improve quality of life



These evaluations may benefit a patient in the functional aspects of life and will be administered by Licensed WV Professionals.



Payment for this services is provided through TBI Services.

Financial Assistance



Funds For You is a "payee of last resort" program set up to provide goods and services that will increase independence for our clients.



Funding provided by WV Department of Health and Human Resources, Bureau for Behavioral Health and Health Facilities funds the program fully.

Financial Assistance

- Permitted Goods and Services
 - Medical/dental/vision services
 - Adaptive equipment or assistive technology
 - Home modifications
 - Therapy services (physical, speech, cognitive, and occupational)
 - Other items to promote independence

Category	Сар	Timeframe
Medical	\$2,000	Per Fiscal Year
Dental	\$2,000	Per Fiscal Year
Adaptive Equip./Home Mod.	\$2,000	Per Fiscal Year
Assistive Tech./Training	\$700	Per Fiscal Year
Vision	\$500	Per Fiscal Year
Start Up	\$2,000	1 time per 3 years
Case Management	\$300	Per Fiscal Year
Other	\$1,000	Per Fiscal Year

Teacher Acute Concussion Tool (TACT)

 The Teacher Acute Concussion Tool (TACT) is the ONLY digital tool for Return to Learn Post-Concussion!

- Physicians, nurse, athletic trainer, counselor, athletic director, administrator, etc. can initiate process.
- Demographic information
- Enter email of student's teachers/parents/guardians
- The TACT automatically sends 4 weeks of emails with continued academic guidance and support





The Teacher Acute Concussion Tool

TACT

is the ONLY digital tool for Return to Learn Post-Concussion!

Instructions

 Scan QR Code or visit www.getschooledonconcussions.com/westvirginia/



- Enter Password: TACTwvirginia2021
- Click on "Access TACT"
- The TACT asks teachers to answer 7 questions (elementary school teachers) or 8 questions (middle/high school teachers) about WHAT, WHEN & HOW they teach
- The TACT sends immediate academic guidance to teachers, based on their answers to adjust their classroom to the Return to Learn (RTL) needs of the student post-concussion
- The TACT automatically sends 4 weeks of emails with continued academic guidance and support



CENTER FOR EXCELLENCE IN DISABILITIES TRAUMATIC BRAIN INJURY SERVICES



This card was created and disseminated by the Traumatic Brain Injury Program at West Virginia University Center for Excellence in Disabilities.

Traumatic Brain Injury Services

Center for Excellence in Disabilities

959 Hartman Run Road

Morgantown, WV 26505

Fax: 877-530-7734

Email: TBI@hsc.wvu.edu

Website: tbi.cedwvu.org

Toll free 877-724-8244

The Traumatt: Brain Injury Services are supported in part by the West Virginia Department of Health and Human Resources, Bureau for Behavioral Health and Health Facilities and the U.S. Department of Health and Human Services, Administration For Community Living Grant Number 90°T8520038-01-00. Grantees undertaking projects with government sponsorialip are encouraged to express fleely their findings and conclusions. Points of view or opinions do not, therefore, necessarily represent official ACL, policy.

All printed materials are available in alternate formats upon request. WVU is an EEO/Affirmative Action Employer – Minority/Female/Disability/Veteran.6/22 for Excellence in Disabilities



I am a person with a Brain Injury.

Name:	
Address:	
Emergency Contact:	
Emergency Phone:	



Please turn card over I can best communicate in a calm, non-confrontational manner. If you observe any of the symptoms below, please help me by calling the emergency contact listed on this card. **THANK YOU**.

My Symptoms Include:

Poor coordination, balance or muscle control.
Slurred speech, impaired judgement.
Impaired attention, concentration, memory.
Delayed thought processing and response time.
Difficulty controlling anger or aggressive behavior.
Seizures, headaches or fatigue.
Sensitivity to light and sound.

Technical Assistance

- TBI Services can provide technical assistance to agencies that request information or supports relating to TBI.
- We also offer the educational Big Brain at multiple events across the state.



TBI Support Group Calendar

Group	Day of Month	Time	Contact	
Morgantown Brain Injury Support Group	First Thursday of each month	6:00 pm — 7:00 pm	Courtney Pride courtney.pride@hsc.wvu.edu (304) 293-4692	
Eastern Panhandle Brain Injury Support Group	Second Monday of each month	6:30 pm— 8:00 pm	Sarah Hitchings wvepbig@gmail.com (304) 596-3550	
Brain Injury Group of Southern WV	Third Tuesday of each month	6:00 pm— 8:00 pm	Teresa Harvey (304) 575-5995 Shannon Hughart (304) 222-1132	
Monthly Mindfulness Sessions	Third Friday of each month	12:00 pm— 1:00 pm	Cortland Nesley tbi@hsc.wvu.edu 877-724-8244	
Mid-Ohio Valley Brain Injury Support and Informational Group	Fourth Tuesday of each month	5:30 pm— 6:30 pm	Sara Rose <u>srose@jcdcworks.com</u> (304) 273-9311 x307	
Brain Injury Group at Marshall	Last Wednesday of each month	6:00 pm— 7:30 pm	Kelly Rutherford davis139@marshall.edu (304) 696-2982	
Caregiver Support Group	Last Friday of each month	12:00 pm— 2:00 pm	Carrie Cobun-Stark ccobun@hsc.wvu.edu	



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Contact Information

• Referral:

https://redcap.wvctsi.org/redcap/surveys/?s=YCYD3TWKAR

Webiste: https://tbi.cedwvu.org/

Facebook: https://www.facebook.com/WVTBI/

2024 TBI Conference March 2024

Conference Agenda TBA

Professionals, Individuals with TBI, & Caregivers

Thank you for your time!

Questions?

