

Ohio Brain Injury Advisory Committee

Brain Injury Program 2022 State Plan

PREPARED BY



Ohio Brain Injury
Program

BACKGROUND

In 1990 the Ohio General Assembly created the Ohio Brain Injury Program (BIP) and Ohio Brain Injury Advisory Committee (BIAC) to address the needs of Ohioans living with the effects of brain injury. The BIAC is composed of 12 appointed individuals representing specific membership categories defined in Ohio Revised Code Section 3335.61. In addition, the BIAC includes representation from the directors or their designees from 10 different state agencies: departments of Health, Medicaid, Mental Health and Addiction Services, Developmental Disabilities, Job and Family Services, Public Safety, Education, and Aging, along with the Bureau of Workers' Compensation and Opportunities for Ohioans with Disabilities.

In 2013, the BIP and BIAC were moved to The Ohio State University College of Medicine to allow leadership from medical experts. To reinvigorate the program's activities a strategic plan was developed to address Ohioans living with the effects of brain injury. That plan addressed activities into 2020. Starting in 2019, the BIAC and BIP embarked on a new strategic planning process that will guide our work from 2020 to 2025.



Brain Injury In Ohio



In 2017 — the most recent year for which data are available — more than 2,600 Ohioans died from TBI and more than 120,000 injuries were treated in emergency departments or required hospitalization. [Sources: Ohio Department of Health Bureau of Vital Statistics and Ohio Hospital Association]



In 2017, for every 100,000 Ohio residents, 21 died due to TBI. Over the previous 10 years, the TBI death rate has increased by more than 17%. [Source: Ohio Department of Health Bureau of Vital Statistics]



In 2017, almost 28,000 children under the age of 15 were treated in emergency departments for TBI and nearly 650 were hospitalized. [Source: Ohio Hospital Association]



While the largest proportion of TBI-related emergency department visits was among young adults 15–24 years old (17.6%), older adults 75–84 years old made up the largest proportion of TBI-related hospitalizations (18%) and deaths (14%). [Source: Ohio Hospital Association]



Falls remained the most common cause of TBI. In 2017, twice as many injuries resulted from falls compared to motor vehicle transports, which was the second most common cause. [Source: Ohio Trauma Registry]



Brain Injury In Ohio (cont.)



Among persons hospitalized for TBI from 2015–2017, the most frequent discharge status was “going home without services.” [Source: Ohio Trauma Registry]



An estimated 1.9 million adult Ohioans (almost 1 in 4) have incurred at least one TBI in their lifetime, and nearly 250,000 (almost 1 in 30) have had a moderate or severe TBI. [Source: Ohio Behavioral Risk Factors Surveillance Survey]



Around 1.3 million Ohio adults have had a TBI severe enough to cause loss of consciousness – more than 60% of those injuries occurred before they were 20 years old. [Source: Ohio Behavioral Risk Factors Surveillance Survey]



More than 550,000 Ohio adults reported having both a disability and a history of TBI with loss of consciousness, and 135,000 Ohio adults reported having both a disability and a history of moderate or severe TBI. [Source: Ohio Behavioral Risk Factors Surveillance Survey]



The TBIs that occurred in 2017 in Ohio will have lifetime costs of \$6 billion in medical expenses and lost wages. [Sources: U.S. Center for Disease Control and Prevention WISQARS Cost of Injury Reports, Ohio Department of Health Bureau of Vital Statistics and Ohio Hospital Association]

These findings demonstrate that brain injury remains not only a major issue but a growing public health problem in Ohio. Incidence trends are heading in the wrong direction, and costs will follow. The number of cases in the state’s population can be expected to grow, and the implications of dealing with chronic disease and disability will increase the impact.



Ohio 2020-2025 Strategic Plan

The plan was created using a 5-step, iterative process between the BIAC and the larger community of stakeholders interested in brain injury. The 5-step process followed this structure and timeline:

Step 1

The BIAC and BIP generated a comprehensive list of potential objectives in each goal area. (July-August 2019).

Step 2

A web-based survey was used to elicit feedback from the Ohio brain injury community on the importance of each objective. (August-September 2019).

Step 3

The BIAC and BIP selected proposed objectives for the 2020-2025 Strategic Plan based on community priorities, opportunities for success and available resources. (October-November 2019).

Step 4

The BIAC and BIP received web-based and in-person input on the proposed priorities (December 2019-March 2020).

Step 5

The BIAC approved a 2020-2025 Strategic Plan, shown below (April 2020).



2020-2025 Goals

Goal 1

Have good data for statewide planning and evaluation

1.1 Determine the prevalence and unique needs of persons with brain injury by establishing screening and/or identification among people in these Ohio service delivery systems:

- 1.1.1 behavioral health treatment programs
- 1.1.2 domestic violence programs
- 1.1.3 long-term care facilities (nursing homes)
- 1.1.4 Home and Community Based Services waiver programs
- 1.1.5 Ohio Medicaid Managed Care Organizations

1.1.2 Establish a volunteer registry of Ohioans with brain injury and family members that can be used to survey needs and distribute information about services and supports in Ohio.

1.3 Utilize existing, surveillance data about the occurrence of traumatic brain injuries to identify trends in who is injured, how they are injured and where they are treated.

1.4 Use the Ohio Behavioral Risk Factors Surveillance System to measure the prevalence of a history of traumatic brain injury among Ohio adults.

1.5 Develop a method for measuring the relationship between brain injury and domestic violence.

Goal 2

Have a workforce of healthcare and social service providers who understand brain injury and can adapt their treatment to better serve persons with a history of brain injury.

2.1 Add instruction about brain injury in the associate, undergraduate and/or graduate training of social workers and nurses.

2.2 Add education on the chronic effects of brain injury to graduate training of physical therapists, occupational therapists and speech-language pathologists.

2.3 Conduct in-service training and provide case consultation to professionals in Ohio's behavioral health treatment programs, nursing facilities, domestic violence programs, Managed Care Organizations, Area Agencies on Aging and Independent Living Centers.

2.4 Advocate with national brain injury organizations to change professional credentialing to include brain injury information in both training and licensing examinations of healthcare professionals.



2020-2025 Goals

Goal 3

Advocate for use of best practices for accommodating the effects of brain injury encountered in specific service delivery and support systems.

3.1 Advocate for best practices for serving people with brain injury in each of these service settings:

- 3.1.1 programs serving veterans and their families;
- 3.1.2 mental health and substance use disorder treatment programs;
- 3.1.3 programs that help older adults and persons with disability to stay in their own homes;
- 3.1.4 long-term care facilities (nursing homes);
- 3.1.5 domestic violence programs;
- 3.1.6 vocational rehabilitation programs (this emphasis will commence in 2022).

3.2 Promote best practices in programs designed specifically for persons living with brain injury:

- 3.2.1 case management for persons with brain injury and their families;
- 3.2.2 information and referral to resources (I&R);
- 3.2.3 community-based socialization programs for persons with brain injury;
- 3.2.4 brain injury support groups.

Goal 4

Increase awareness of the issues faced by persons with brain injury and their families.

4.1 Develop a plan for additional public sector financing of supports for persons with brain injury and their families.



2020-2025 Goals

Goal 5

Create the infrastructure for strategic plan implementation

5.1 Make changes to BIP/BIAC to reflect guidance from ACL

5.2 Increase resources for BIP staffing and programs

The BIP created a tactical plan for implementation of the 5-year Strategic Plan that was presented to the BIAC in July 2020. The remainder of this Plan present those objectives and tactics that are slated for continuation, initiation and/or completion in 2021. These tactics will define the work conducted by the BIP staff and BIAC in the coming year.



BIP/BIAC Proposed Activities for 2022

The BIP created a tactical plan for implementation of the 5-year Strategic Plan that was presented to the BIAC in July 2020. Those objectives and tactics that are slated for continuation, initiation and/or completion in 2021 are shown on the next pages.



BIP/BIAC Proposed Activities

Goal 1

Have good data for the statewide planning and evaluation

Objective	Tactic	Status
1.1 Determine the prevalence and unique needs of persons with brain injury by establishing screening and/or identification among people in these Ohio service delivery systems:		
1.1.1 behavioral health treatment programs	Advocate for systematic screening of behavioral health clients	Continuing to advocate.
	Establish procedures for regular reporting of data from screening	Dependent on above
1.1.2 domestic violence programs	Collaborate with Ohio Domestic Violence Network (ODVN) to evaluate utility of screening for brain injury	On-going collaboration with ODVN.
1.1.3 long-term care facilities (nursing homes)	Request TBI data (I5500) from MDS 3.0 reporting to Center for Medicaid and Medicare Services	2nd qtr. 2020 showed 1% of Ohio nursing home residents [59,015] have an active dx of TBI in the last week.) 1st qtr. 2021 may show reporting changes.
	Evaluate needs associated with active diagnosis of TBI	Evaluate needs associated with active diagnosis of TBI
	Identify potential policy or procedure changes to improve quality of life for residents in long-term care facilities	Evaluating a Civil Money Penalty grant application with focus on Disorders of Consciousness.



BIP/BIAC Proposed Activities

Goal 1 (cont.)

Have good data for the statewide planning and evaluation (cont.)

Objective	Tactic	Status
1.1.4 Home and Community Based Services waiver programs	Establish procedures for regular reporting of frequencies and crosstabs from the OBLTSSQ TBI screening	Currently analyzing 65,000 records to identify unique needs of callers with TBI.
	Determine how waiver process and outcomes can be examined as a function of TBI history	Continuing to evaluate.
1.1.5 Ohio Medicaid Managed Care Organizations	Identify Manage Care Organizations (MCOs) willing to conduct systematic screening	Continuing to advocate.
	Collaborate with MCOs to determine unique needs of enrollees with histories of brain injury.	Dependent on above
1.2 Establish a volunteer registry of Ohioans with brain injury and family members that can be used to survey needs and distribute information about services and supports in Ohio.		
	Build web-based infrastructure and gain IRB approval for deployment	OSU Chronic Brain Injury Program have been delayed building the website
	Promote registration among Ohio Brain Injury Association, BIP, and TBI Model Systems constituents	Dependent on above
	Conduct outreach to acute and rehabilitation hospitals to promote voluntary registration of recently treated patients	Dependent on above



BIP/BIAC Proposed Activities

Goal 1 (cont.)

Have good data for the statewide planning and evaluation (cont.)

Objective	Tactic	Status
	Develop plan for sharing information on brain injury with Registry enrollees	Dependent on above
	Develop plan for eliciting needs from Registry enrollees	Dependent on above
	Formalize funding and procedures for on-going use of the Registry	Dependent on above
1.3 Utilize existing, surveillance data about the occurrence of traumatic brain injuries to identify trends in who is injured, how they are injured and where they are treated.		
	Make recommendations for enhancing use of incidence data for Ohio policy	Biennial Report released in 2022 will include 2018-2019 incidence data
	Produce annual report with data through 2019	Expect 2022 Biennial Report in 1st qtr. 2022
1.4 Use the Ohio Behavioral Risk Factors Surveillance System to measure the prevalence of a history of traumatic brain injury among Ohio adults.		
	Develop a comprehensive plan for research and policy development using prevalence data	Collaborators from OSU, Ohio Department of Health and Nationwide Children's Hospital completing research projects using 2016-2019 data. Further accumulation of annual data will allow more projects.



BIP/BIAC Proposed Activities

Goal 1 (cont.)

Have good data for the statewide planning and evaluation

Objective	Tactic	Status
	Advocate for inclusion annually in Ohio Behavioral Risk Factors Surveillance Survey (BRFSS)	Biennial Report released in 2022 will include 2018-2019 prevalence data. Has been included through 2021. 2022 selection in process.
1.5 Develop a method for measuring the relationship between brain injury and domestic violence.		
	Analyze association between TBI and domestic violence in 2020 Ohio BRFSS	Collaborators meeting November 2021 to plan analyses of 2020 data
	Advocate for inclusion of Intimate Partner Violence (IPV) and TBI modules annually in Ohio 2021 & 2022 BRFSS	Was included in 2021. Have advocated for 2022. May require all 3 years to do specific analysis of TBI and IPV.

Goal 2

Have a workforce of healthcare & social service providers who understand brain injury and can adapt their treatment to better serve persons with a history of brain injury

Objective	Tactic	Status
2.1 Add instruction about brain injury in the associate, undergraduate and/or graduate training of social workers and nurses.	Promote adoption of Social Work (SW) curriculum in additional Colleges & Universities	5 SW programs have adopted; presenting to statewide directors of Associate degree programs in November 2021.
	Evaluate effectiveness of modules in Social Work programs in Ohio	Will request updates from adopters.



BIP/BIAC Proposed Activities

Goal 2 (cont.)

Have a workforce of healthcare & social service providers who understand brain injury and can adapt their treatment to better serve persons with a history of brain injury

Objective	Tactic	Status
	Adapt curricula for nursing education	Continuing to seek program for initial collaboration.
	Promote adoption of Nursing curriculum in additional training programs in Ohio	Subject to above.
2.2 Add education on the chronic effects of brain injury to graduate training of physical therapists, occupational therapists and speech-language pathologists.	Determine content needed for pre-service training of rehabilitation professionals	Communications WG evaluating potential content.
	Design curricula based on needed content	Subject to above.
2.3 Conduct in-service training and provide case consultation to professionals	MCOs	Stalled by COVID. Looking at ways to increase training capabilities.
	Area Agencies on Aging	Slowed with COVID; re-start with workshop at o4a conference October 2021. Looking at ways to increase training capabilities.
	Independent Living Centers	Stalled by COVID. Looking at ways to increase training capabilities.



BIP/BIAC Proposed Activities

Goal 2 (cont.)

Have a workforce of healthcare & social service providers who understand brain injury and can adapt their treatment to better serve persons with a history of brain injury

Objective	Tactic	Status
	State Behavioral Health Providers (SBHP) Program registry participants	Pushed out "What If..." for behavioral health. Looking at ways to increase training capabilities.
	Community mental health programs	Ohio MHAS Medical Director's office has promoted with local Boards and agencies. On-going.
	Nursing facilities	On-going trainings for State Ombudsman's office. Evaluating Disorders of Consciousness curriculum.
	Domestic violence programs	ODVN PIBI program on-going.
2.4 Advocate with national brain injury organizations to change professional credentialing to include brain injury information in both training and licensing examinations of healthcare professionals.	Identify national brain injury organizations (e.g. National Association of State Head Injury Administrators, Brain Injury Association of America, United States Brain Injury Alliance) for sign-on to the Policy Brief	See below. Will add other national organizations as signees to USMLE response.
	Identify credentialing bodies who manage the licensing examinations of healthcare professionals to receive the Policy Brief	Targeted USMLE. Spencer Smith's letter on behalf of the BIAC received a response.



BIP/BIAC Proposed Activities

Goal 2 (cont.)

Have a workforce of healthcare & social service providers who understand brain injury and can adapt their treatment to better serve persons with a history of brain injury

Objective	Tactic	Status
	Advocate for revisions/additions to the licensing examinations of healthcare professionals to include brain injury information	Partnering with the ACRM Chronic BI SIG to craft a response to inquiry received from USMLE.

Goal 3

Advocate for use of best practices for accommodating the effects of brain injury encountered in specific service delivery and support systems

Objective	Tactic	Status
3.1 Advocate for best practices for serving people with brain injury in each of these service settings:		
3.1.1 programs serving veterans and their families	Find funding for continued implementation of SBHP Program	Ohio MHAS again extended 1-year contract. Can now maintain core with state line item revenue, allowing Ohio MHAS funding to go entirely to trainings.
	Sustain SBHP trainings	See above
	Sustain SBHP registry with goal of at least 1 provider in every county	State line-item revenue assures sustainability. Continuing to focus on rural counties without registry participants. Have 59/88 counties with participants.



BIP/BIAC Proposed Activities

Goal 3 (cont.)

Advocate for use of best practices for accommodating the effects of brain injury encountered in specific service delivery and support systems

Objective	Tactic	Status
3.1.2 mental health and substance use disorder treatment programs	Identify best practices for behavioral health treatment of persons with brain injury	Advocacy on-going
	Implement best practices for behavioral health treatment of persons with brain injury	Dependent on above.
3.1.3 programs that help older adults and persons with disability to stay in their own homes	Identify best practices for Home & Community Based Services	Will use LTSS Questionnaire data to identify unique needs.
	Implement best practices in Home & Community Based Services	Dependent on above.
3.1.4 long-term care facilities (nursing homes);	Identify best practices for Home & Community Based Services	Will use LTSS Questionnaire data to identify unique needs.
3.1.4 long-term care facilities (nursing homes);	Implement best practices in Home & Community Based Services	Dependent on above.
3.1.5 domestic violence programs	Add brain injury component to Ohio Domestic Violence Network's Trauma Informed Care series	Will continue discussions with ODVN.
	Collaborate with Ohio Domestic Violence Network to promote Trauma Informed Care series	Dependent on above.



BIP/BIAC Proposed Activities

Goal 3 (cont.)

Advocate for use of best practices for accommodating the effects of brain injury encountered in specific service delivery and support systems

Objective	Tactic	Status
3.1.6 vocational rehabilitation programs	Identify best practices in vocational rehabilitation programs	Slated to begin July 2022
3.2 Promote best practices in programs designed specifically for persons living with brain injury		
3.2.2 information and referral to resources (I&R);	Continue support of the Brain Injury Association of Ohio's Information and Referral (I & R) function	Hope to begin serving persons with brain injury and families November 2021
	Improve data capture to allow input to policy.	In progress by BIA-OH
	Renew US Department of Health and Human Services Administration on Community Living State Grant funding to continue to support I & R function at OBIA	Continue \$10,000 to I & R at BIA-OH
3.2.4 brain injury support groups	Work with the Brain Injury Association of Ohio to implement support for Support Groups as called for in the Biennium budget	Contracting with BIA-OH



BIP/BIAC Proposed Activities

Goal 4

Increase the awareness of the issues faced by persons with brain injury and their families

Objective	Tactic	Status
4.1 Develop a plan for additional public sector financing of supports for persons with brain injury and their families.	Identify key stakeholders	On-going
	Develop plan to reach target audience	On-going
	Develop content for dissemination	Awaiting next Biennium Budget
	Implement, evaluate and update plan	Continue \$10,000 to I & R at BIA-OH

Goal 5

Create the infrastructure for strategic plan implementation

Objective	Tactic	Status
5.1 Make changes to BIP/BIAC to reflect guidance from ACL	Conduct Annual Plan process	2021 completed. Initiating 2022.
	Pursue legislation to change the composition of the BIAC to a majority with lived experience	On-going



BIP/BIAC Proposed Activities

Goal 5 (cont.)

Create the infrastructure for strategic plan implementation

Objective	Tactic	Status
5.2 Increase resources for BIP staffing and programs	Identify key stakeholders	On-going
	Examine feasibility of applying for state funds to address brain injury in Nursing Facilities	No progress
	Apply for US Department of Health and Human Services Administration on Community Living State Grant	Awaiting next Biennium Budget

