Brain Injury Assistance Act Mid-Year Report (July – December 2023)

The Brain Injury Assistance Act – previously know as the Brain Injury Trust Fund Act until 2022 – has seven expenditure priorities:



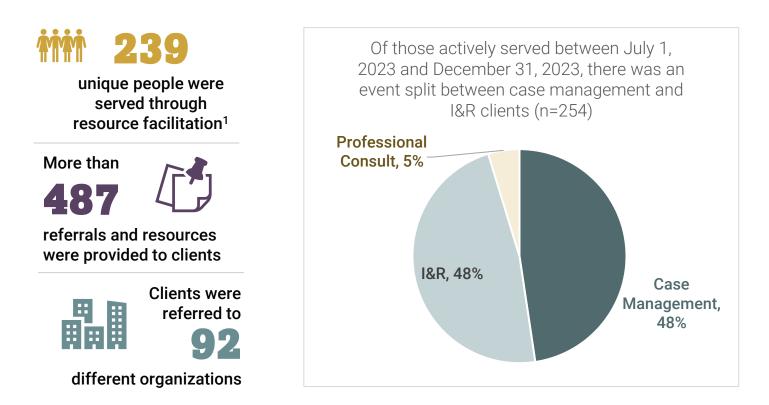
The Brain Injury Alliance of Nebraska (BIA-NE) was awarded the funding during the first year (July 2021 – June 2022), second year (July 2022 – June 2023), and the third year. This report summarizes BIA-NE efforts in each of the seven priority expenditures, primarily focusing on efforts in the first half of the third year (July 2023 – December 2023).



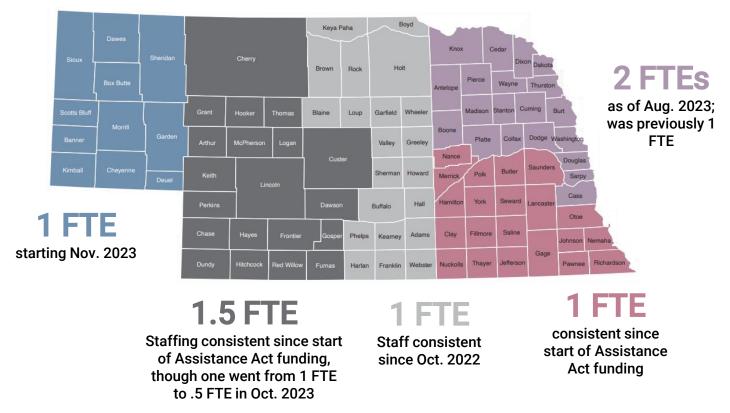


PRIORITY 1 Resource Facilitation

See the Resource Facilitation report for a comprehensive summary of clients served by the BIA-NE through Resource Facilitation



Although there were staff vacancies during the six-month period, capacity for Resource Facilitation continued to grow beyond the 1.5 FTE that was in place prior to the Assistance Act funding



¹ This includes all clients with an Information & Referral or Case Management case as well as the Professional Consult cases (a person assisted through another agency).

PRIORITY 2 Training for Service Providers

Brain Injury 101 trainings were 23 offered to professionals Attendees reached (average of 513 23 per event) Minutes was the average 75 length of events 105 **Evaluations were completed** Common professions reported on the evaluation form included social workers, medical students, and specialists such as shared living or peer support (n=100) US Air Force cavalier Family Resource Navigator SPED Teacher Recovery Community Navigator Service Area Manager Youth Community Support Navigator Youth Program Facilitator Registered Nurse care specialist Parenting Facilitator etired Hearing aid attendant rks Maintenanc Program direct Officer In-home cliniciar cate dministrative/clerica Clinical preventative program support pecialist

> Shelter Manager Development Coordinator Foster care admissions Foster Care Supervisor Wellness and Education Directo DV Services Director

The stats were alarming! This is a very underserved population.



Some of the data made an impression on me as to how much more common it is.

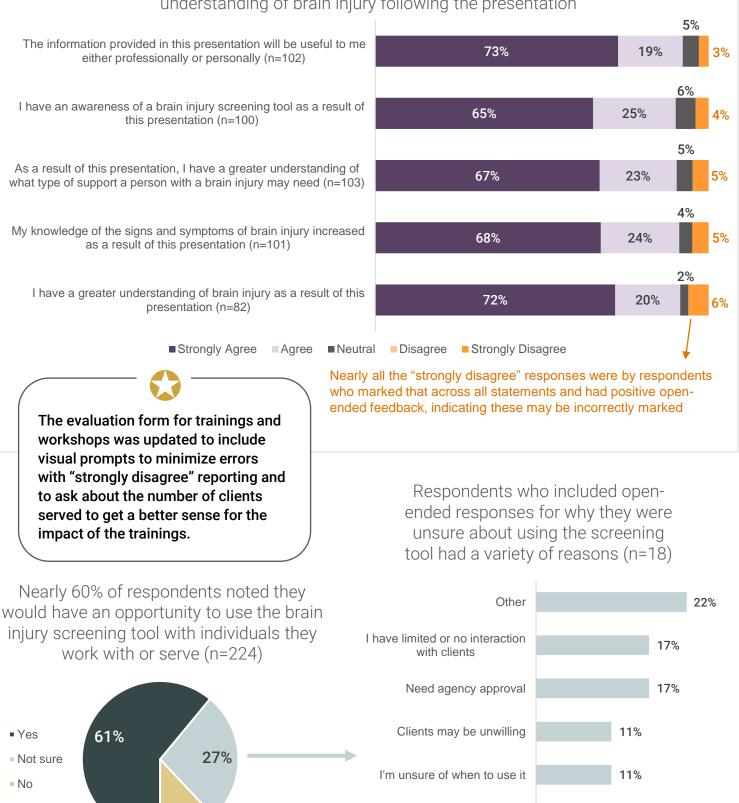




² A respondent could select more than one response option. That was the case for 33 of the respondents.

PRIORITY 2

More than 90% of the evaluation respondents agreed they have a greater understanding of brain injury following the presentation



Nearly all who responded "no" noted it was because they do not work directly with clients, or it is not applicable to their role

12%

Clients may be unwilling
I'm unsure of when to use it
It's not my role in the agency
It wouldn't be appropriate for
our clients/patients
Lack of training

4

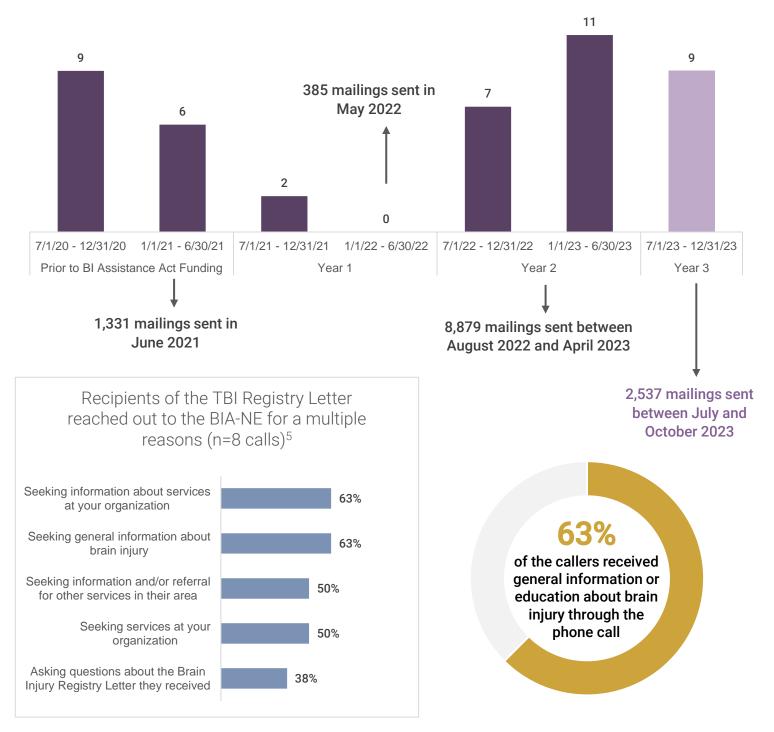
11%

6%

6%

PRIORITY 3 Brain Injury Registry Letter Follow-up³

The number of clients who contact the BIA-NE as a result of the BI Registry Letter seems to depend on when and how many mailings were sent by Nebraska VR (Vocational Rehabilitation)⁴



³ Additional information about the TBI Registry mailing can be found here: <u>https://braininjury.nebraska.gov/resources/brain-injury-data-and-statistics</u>

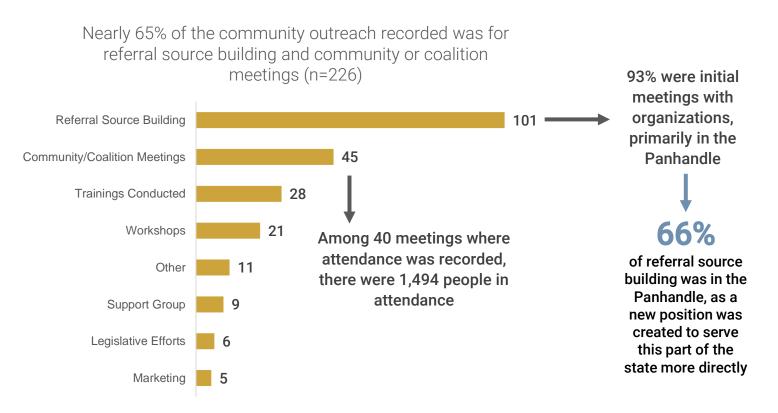
⁴ There are 30 response options for Resource Facilitators to denote regarding how the client heard about BIA-NE. Prior to January 2023, only one response option could be selected. As a result, it is possible that more people prior to January 2023 heard about the BIA-NE through the Registry letter.

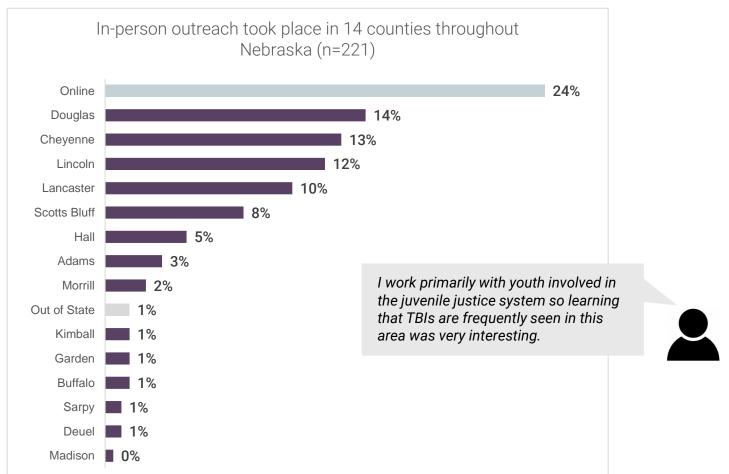
⁵ BIA-NE staff record information from callers through a SurveyMonkey form for Nebraska VR. Staff have a prompt within their database to complete the form when they select the BI Registry Letter as a way a client heard about the BIA-NE.

PRIORITY 4 Public Awareness

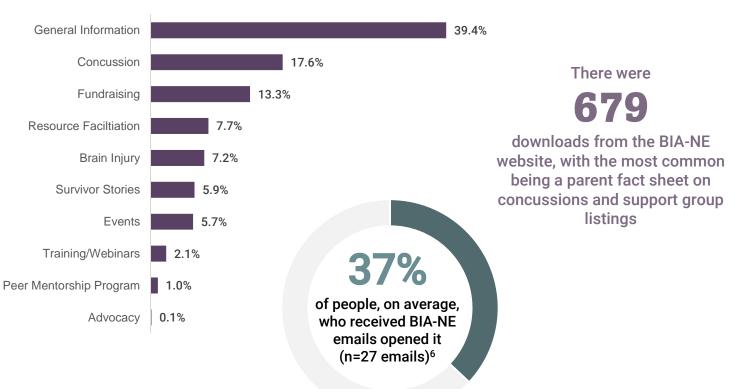


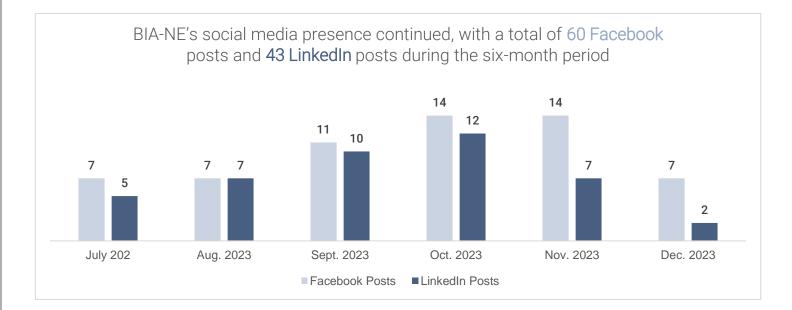
The intent of community outreach for Resource Facilitators is to ensure people in need of services within the community are aware of and can connect to BIA-NE. At some point there will be less focus on referral source building and more on assisting clients.





The most common pages viewed on the BIA-NE website were for general information (contact information, overview, reports) and concussions (n=13,527)





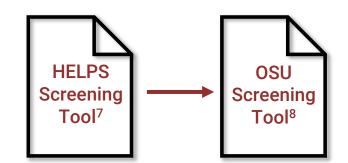
Follower Engagement	Facebook (60 posts)	LinkedIn (43 posts)		
Total Reach/Impressions	22,347	3,899		
Avg. Reach/Impressions per Post	372	90		
Total Likes/Reactions	7,49	43		

BIA-NE had an average of 10 Facebook posts per month and 6 LinkedIn posts per month during the six-month timeframe.

⁶ The number of recipients by email varied based on the intended audience. Ten of the emails went to 188 while another 10 went to 5,452. There were also at least six emails that went to 7,516 individuals.

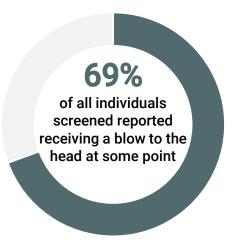
PRIORITY 5 Supporting Research

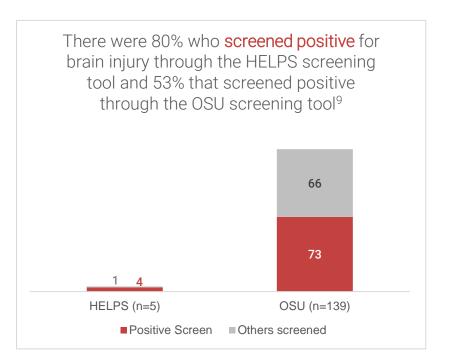
BIA-NA is collaborating with Dr. Kathy Chiou at the University of Nebraska – Lincoln. Dr. Chiou received IRB-approval to collect screening data, with the goal of studying the outcomes and prevalence rates to publish findings. In 2023, the BIA-NE and Dr. Chiou decided to transition from using the HELPS screening tool to the OSU screening tool.



144 individuals

were screened for brain injury among 6 agencies between July and December 2023





There were 6 agencies that were screening clients for brain injury between July and December 2023

Douglas County Youth Center
Lancaster County Youth Center
Lancaster Diversion Program
Safe Center
Sarpy County Juvenile Diversion
South Central NE Area Agency on Aging

Between Jan. and Aug. 2023, 222 youth were screened:

- 72.5% screened positive.
- The average number of potential injury incidents reported by each youth was 3.65

Between Jan. and Oct. 2023, 59 youth were screened:

- 86.4% screened positive for some sort of brain injury
- The average number of potential injury incidents reported by each youth was 5

⁷ National Association of State Head Injury Administrators (n.d.). HELPS brain injury screening tool. <u>https://www.nashia.org/resources-list/cdxvc5lcq3q3ycesazm0wfyg9umxye</u>

Omaha

Lincoln

Lincoln

Kearney

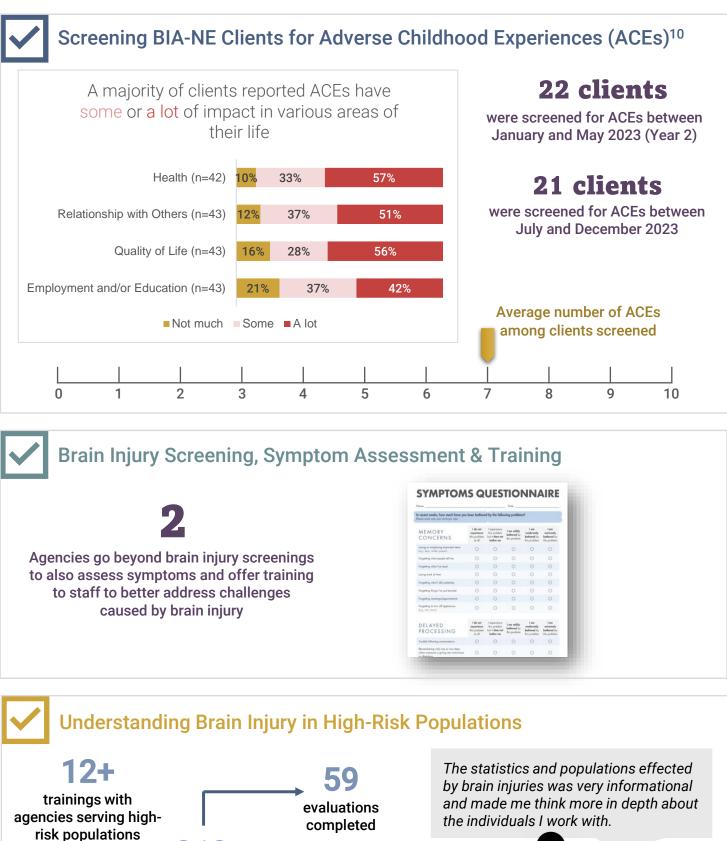
Papillion

Kearney

⁹ The higher percentage of positive screenings through the OSU tool is likely not due to differences in the tool but rather the population that is being screened.

⁸ BrainLine (n.d.). Ohio State University TBI identification method. <u>https://www.brainline.org/article/ohio-state-university-tbi-identification-method</u>

PRIORITY 6 Quality Improvement & Standards of Care





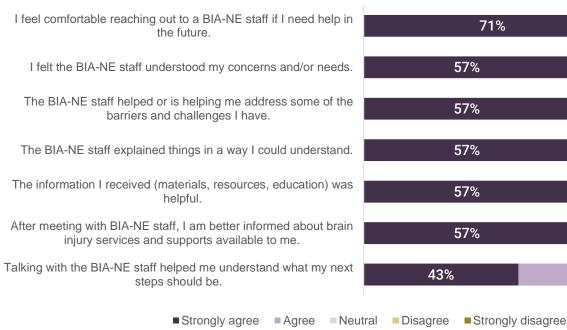
¹⁰ Centers for Disease Control and Prevention (June 2023). Adverse Childhood experiences. <u>https://www.cdc.gov/violenceprevention/aces/index.html</u>

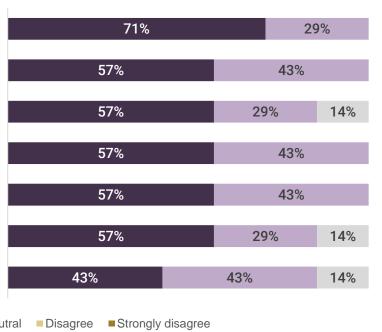
attendees



Of those who received a client satisfaction survey January 2024 (n=86), only seven completed it¹¹

None of the survey respondents disgreed with any of the statements regarding their experience with the BIA-NE (n=7)





The patience and understanding shown me by each person I spoke with. They all genuinely cared about my comfort, confidence, and self-esteem.

100%

of the respondents reported the amount of communication they had with the BIA-NE staff was "about right"

The most common ways survey respondents decided to reach out to BIA-NE was 1) having it be recommended by a medical professional and 2) having an individual with brain injury telling them about the organization

Every time we had contact, I received great information and all of my questions were answered. We never had any non-productive contact.



At least three BIA-NE staff members participate in the Brain Injury Data Workgroup. A focus during this time period was developing the data collection tools that will be used as part of the statewide brain injury needs assessment. In addition to reviewing the tools and providing input, BIA-NE staff identified individuals to pilot the individuals with brain injury survey to ensure it is user-friendly and will adequately evaluate needs.

BRAIN INJURY ASSISTANCE ACT SPENDING

	YEAR ONE July 2021 - June 2022			YEAR TWO July 2022 - June 2023			YEAR THREE July 2023 - Nov. 2023*		
Total Funding:		450,000.00		\$	450,000.00		\$ 4	450,000.00	
Use of Funding:									
Payroll and Related Expenses	\$	373,079	70%	\$	484,488	74%	\$	291,064	78%
Accounting and Auditing Fees	\$	4,451	1%	\$	5,645	1%	\$	-	0%
Consultants	\$	47,107	9%	\$	61,762	9%	\$	27,266	7%
Advertising & Promotion	\$	23,069	4%	\$	23,447	4%	\$	6,992	2%
Bank, Credit Card, and Investment Fees	\$	989	0%	\$	640	0%	\$	528	0%
Software and Website Expenses	\$	24,155	5%	\$	7,757	1%	\$	10,061	3%
Conferences and Meetings	\$	731	0%	\$	1,976	0%	\$	1,552	0%
Dues & Subscriptions	\$	7,407	1%	\$	6,687	1%	\$	675	0%
Program Events and Efforts	\$	200	0%	\$	7,045	1%	\$	838	0%
Insurance	\$	5,346	1%	\$	9,592	1%	\$	3,755	1%
Office Supplies and Expenses	\$	11,494	2%	\$	4,593	1%	\$	4,965	1%
Postage, Mailing Service	\$	126	0%	\$	205	0%	\$	54	0%
Printing & Copying	\$	10,429	2%	\$	2,889	0%	\$	9,604	3%
Rent and Utilities (Telephone, Internet)	\$	3,163	1%	\$	4,982	1%	\$	1,717	0%
Travel and Meals	\$	9,009	2%	\$	21,970	3%	\$	11,422	3%
Professional Development/Training	\$	12,772	2%	\$	13,460	2%	\$	2,463	1%
Miscellaneous	\$	67	0%	\$	882	0%	\$	288	0%
Total Use of Funding:	\$	533,594		\$	658,019		\$	373,244	
Underspent (Overspent)	\$	(83,594)		\$	(208,019)				

During the first two years, BIA-NE spent more than \$290,000 cumulatively of its own operating funds to supplement the work funded by the Brain Injury Assistance Act. Although the Brain Injury Assistance Act funds the majority share of the costs incurred under the program, demand for resources and assistance and the resulting costs exceed what the Act funds. To cover the additional costs, BIA-NE utilizes contributions from its donors and Medicaid Administrative Claiming (MAC) funding received under its relationship with the Aging and Disability Resource Center (ADRC), resulting in BIA-NE funding approximately 25% of the total program costs with its own operational resources.



Partners for Insightful Evaluation

83%

of the Year 3

Assistance Act funds

have been spent through December

2023