



Iowa Department of Health and Human Services

Updates from the Brain Injury Services Program

October 17, 2024
MHDS Commission & I-PAC meeting



Health and
Human Services

Brain Injury in Iowa

Approximately 17,000 traumatic brain injuries (TBI) occur each year which result in being seen in the emergency department, hospitalization or death.

But many brain injuries go unreported or undiagnosed.

Prevalence of Brain Injury in Iowa

28.3% of adults reported having a TBI in their lifetime.

They were more likely to report:

- ▶ 4+ ACEs (30% vs 14.4%)
- ▶ Frequent mental distress (19% vs. 10.9%)
- ▶ Diagnosed depression (27.5% vs 16.1%)
- ▶ Use of prescription opioids (25.5% vs. 15.6%)

(Iowa BRFSS, 2022)

13% of adolescents reported having a concussion in the past 12 month.

They were more likely to:

- ▶ Be in a physical fight (30% vs. 14%)
- ▶ Binge drink (18% vs. 9%)

(Iowa YBRS, 2021)

Brain Injury Services Program

► 641—56.2(135) Purpose.

The purpose of the brain injury services program is to provide services, service funding, or other support for persons with a brain injury under one of the program component established pursuant to Iowa Code section 135.22B.



Brain Injury Service Program Cont'd

Brain Injury Resource Facilitation is a nationally recognized, best-practice brain injury service administered by Iowa HHS via a contract with the Brain Injury Alliance of Iowa.

Resource facilitation is a **linkage to existing services and supports service providers** to increase their capacity to support individuals with brain injury.

State Plan on Brain Injury 2021 - 2026



Goal #1 Increase brain injury screening, assessment, and service coordination across systems of care that address multi-occurring conditions often experienced by individuals with brain injury.

Goal #2 Improve timely access to the appropriate medical and community-based services for people with brain injury.

Goal #3 Increase utilization of Neuro-Resource Facilitation (NRF) services in Iowa among underserved populations.



Goal #4: Develop service recommendations to meet the needs of Iowans with brain injury.

Goal #5: Develop a well-trained and culturally competent workforce of providers that serve and support individuals with brain injury.



Goal #6: Reduce preventable acquired brain injury through implementation of sustainable, structural changes in Iowa.

Goal #7: Increase utilization of best practices for concussion prevention and management.



Goal #8 Increase awareness of brain injury within state systems and processes.

Goal #9: Expand information on non-traumatic brain injury and prevention, including emerging issues (e.g. COVID-19).

Goal #10: Raise awareness about the incidence of traumatic brain injury related to motor vehicle injuries

Goal #11: Raise awareness about the incidence of traumatic brain injury related to sports/recreational injuries.

Creating Brain Injury- informed Systems

Starting with screening for Lifetime History of Brain Injury.



Health and
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Administration for Community Living State Partnership Program

- ▶ The goal of this project is to strengthen traumatic brain injury informed person-centered, culturally competent systems of services and supports across state level systems in Iowa.

The objectives are:

- 1) increase TBI-informed systems through enhanced resource facilitation (RF);
- 2) increase culturally competent TBI resources and supports;
- 3) increase meaningful and active participation of individuals with TBI and;
- 4) increase data collection and reporting to inform planning and strategies to reduce the impact of TBI.

Adult Screening Tool

Name: _____

Current Age: _____

Interviewer Initials: _____

Date: _____

Lifetime History of Traumatic Brain Injury (from the OSU TBI-ID) and other Acquired Brain Injuries

<p>1. Please think about injuries you have had during your entire lifetime, especially those that affected your head or neck. It might help to remember times you went to the hospital or emergency department. Think about injuries you may have received from a car or motorcycle wreck, bicycle crash, being hit by something, falling down, being hit by someone, playing sports or an injury during military service.</p>	<p>2. Have you ever had a period of time in which you experienced multiple, repeated impacts to your head (e.g., history of abuse, contact sports, military duty)?</p>	<p>3. Have you ever lost consciousness from a drug overdose or being choked?</p>	<p>4. Have you EVER been told by a doctor or other health professional that you had any of the following?</p>
<p>a. Thinking about any injuries you have had in your lifetime, were you ever knocked out or did you lose consciousness?</p> <p><input type="checkbox"/> Yes</p> <p><input type="checkbox"/> No (IF NO, GO TO QUESTION 2)</p> <p>b. What was the longest time you were knocked out or unconscious? (Choose just one; if you are not sure please make your best guess.)</p> <p><input type="checkbox"/> knocked out or lost consciousness for less than 30 minutes</p> <p><input type="checkbox"/> knocked out or lost consciousness between 30 minutes and 24 hours</p> <p><input type="checkbox"/> knocked out or lost consciousness for 24 hours or longer</p> <p>c. How old were you the first time you were knocked out or lost consciousness?</p> <p>_____ years old</p>	<p><input type="checkbox"/> Yes</p> <p><input type="checkbox"/> No (IF NO, GO TO QUESTION 3)</p> <p>a. How old were you when these repeated injuries began?</p> <p>_____ years old</p> <p>b. How old were you when these repeated injuries ended?</p> <p>_____ years old</p>	<p><input type="checkbox"/> Yes</p> <p><input type="checkbox"/> No (IF NO, GO TO QUESTION 4)</p> <p>a. How many times from a drug overdose?</p> <p>_____ overdose(s)</p> <p>b. How many time from being choked?</p> <p>_____ choked</p>	<p><input type="checkbox"/> epilepsy or seizures?</p> <p><input type="checkbox"/> a stroke, cerebral vascular disease or a transient ischemic attack</p> <p><input type="checkbox"/> a tumor of the brain</p> <p><input type="checkbox"/> swelling of the brain (edema)</p> <p><input type="checkbox"/> toxic effects or poisoning by substances</p> <p><input type="checkbox"/> infection like meningitis or encephalitis</p> <p><input type="checkbox"/> a brain bleed or hemorrhage</p> <p><input type="checkbox"/> child or adult maltreatment syndrome</p> <p><input type="checkbox"/> loss of oxygen to the brain - like from a time when you stopped breathing, had a near drowning or experienced a strangulation</p>

Interpreting Findings

The validity of this tool is not based on elicitation of a perfect accounting for a person's lifetime history of brain injury. Instead, it provides a means to estimate the likelihood that consequences have resulted from one's lifetime exposure.

A person may be more likely to have ongoing problems if they have any of the following:

WORST - there has been moderate or severe TBI (i.e. any TBI with 30 minutes or more loss of consciousness).

FIRST - TBI with any loss of consciousness before age 20.

MULTIPLE - had 2 or more TBIs close together; including a period of time when they experienced multiple blows to the head even if apparently without effect.

OTHER SOURCES - any TBI combined with another way that their brain has been impaired.

Complete this screening to determine if a person may have had a brain injury. It is important to note that this screening does not result in a diagnosis, is not intended to be used for eligibility determination and DOES NOT replace a face-to-face evaluation and assessment with a trained professional. This information should be treated as Protected Health Information. Deidentified data may be analyzed for program evaluation.

Pediatric Screening Tool

Name: _____ Current Age: _____ Interviewer Initials: _____ Date: _____



Pediatric Lifetime History of Traumatic Brain Injury & other Acquired Brain Injuries

(from the Colorado Brain Check Survey Screening Tool)

1. Please think about injuries your child (ages 5-21) has had during their entire lifetime, especially those that affected their head or neck. Thinking about those injuries, has your child had any of the following:

Has a physician diagnosed your child with a brain injury?

Yes No

If yes, go to question #3. If not, please indicate if there is a lifetime history of any of the following:

- Blow to the head (from sports, playing, biking, falling, getting hit by an object, etc.)
- Whiplash
- Motor vehicle crash resulting in any degree of injury or lack of injury).
- Assault/violence (child abuse, fights, firearm injury)
- NONE OF THE ABOVE (IF NO, GO TO QUESTION 2)

If yes to any of the above, indicate below if the injury resulted in any of the following:

Check all that apply:

- Concussion
- Loss of consciousness
- For how long? _____
- Confusion or altered mental state
- Missed school
- Resulted in no problem



2. Please indicate if you have ever been told by a healthcare professional that your child has any of the following:

- Loss of oxygen at birth
- Brain tumor
- Cerebral palsy
- Loss of oxygen to the brain (Examples - a time they stopped breathing, had a near drowning or suffocating experience or experienced strangulation)
- Infection of the brain and/or sustained high fever
- Swelling of the brain (edema)
- Epilepsy or seizures
- Child maltreatment syndrome
- Brain bleed or hemorrhage
- Overdose of drugs/alcohol, inappropriate use of prescription drugs/over the counter meds
- Toxic effects or poisoning by substances
- NONE OF THE ABOVE (IF NO, GO TO QUESTION 3)

If yes to any in question 2, indicate below if the injury resulted in any of the following:

Check all that apply:

- Loss of consciousness
- For how long? _____
- Confusion or altered mental state
- Missed school
- Resulted in no problem

3. Has your child ever been to the emergency department or received other medical care related to a brain injury or as identified in questions one or two?

Yes

At what age? _____

Please explain: _____

No

Complete this screening to determine if a person may have had a brain injury. It is important to note that this screening does not result in a diagnosis, is not intended to be used for eligibility determination and DOES NOT replace a face-to-face evaluation and assessment with a trained professional. This information should be treated as Protected Health Information. De-identified data may be analyzed for program evaluation.

This screening tool is adapted from the work of Pat L. Sample Ph.D. and Colorado State University.

The screening tool and instructions for completion can be accessed at <https://hhs.iowa.gov/brain-injuries>



October 2020



Brain Injury Screening Tools & Resources



<https://yourlifeiowa.org/brain-injury>

CALL: (855) 581-8111 TEXT: (855) 895-8398 CHAT: LIVE CHAT HIDE SITE

SCREENING TOOLS FOR PROVIDERS MAYO PORTLAND ADAPTABILITY INVENTORY SYMPTOMS QUESTIONNAIRE IOWA HHS BRAIN INJURY SERVICES PROGRAM BRAIN INJURY ALLIANCE OF IOWA ADDITIONAL RESOURCES YOURLIFEIOWA.SUPPORT

Screening tools for providers

The Lifetime History of Brain Injury is now available in Spanish. Click the button below and select the preferred language.

Access to these tools is password protected. For access, please email brain.injury@hhs.iowa.gov.

LIFETIME HISTORY OF BRAIN INJURY (FOR AGES 13 AND UP)
 PEDIATRIC LIFETIME HISTORY OF BRAIN INJURY (FOR AGES 5-21)

Not finding what you're looking for? ADDITIONAL BRAIN INJURY RESOURCES

Iowa Gets the Ball Rolling

- ▶ **2020** - The Iowa Department of Public Health asked the Technical Assistance Resource Center (TARC)
 - To conduct a literature search on adults with BI involved in the Child Welfare System
 - To find out what other ACL grantees were addressing this issue
 - None of the 28 grantee states were working in this space – but hey we want to be involved
- ▶ **2021 – 2026** Administration for Community Living Traumatic Brain Injury State Partnership Grant (ACL TBI SPP Grant)
 - ACL authorizes an Ad Hoc Workgroup on brain injury and child welfare
 - Iowa and Tennessee co-facilitate with partners in Colorado, Pennsylvania, Connecticut, California, Missouri, and Alabama
 - Develops Brain Injury and Child Welfare Best Practice Guide
 - Training to States: Hawaii, New York, Texas and Michigan!
 - Iowa establishes the Neuro Resource Facilitation Pilot Project

Decision to Create a Guide & Toolkit

BRAIN INJURY AND CHILD WELFARE BEST PRACTICE GUIDE: INFORMATION AND TOOLS FOR STATE AGENCIES

Prepared by the
Administration for Community Living TBI State Partnership Grant
Ad Hoc Workgroup on Child Welfare

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part by Funding Announcement number HHS-2021-ACL-AOD-TBSG-0070
05/27/2021, from the U.S. Administration for Community Living, Department
of Health and Human Services, Washington, D.C. 20201

February 2023



Three Subcommittees:

1. Guide Writing
2. Toolkit – Supporting Materials
3. National Training

Iowa's Neuro Resource Collaborative Pilot Project

- ▶ A Collaborative among:
 - Child Welfare Personnel
 - Child Welfare Related Organizations
 - People w/in the Child Welfare system
 - Universities
 - Brain Injury Alliance of Iowa
 - State Agency Leadership

Continuing to Expand our Reach

New partnerships and activities are always being developed

Youth Concussion Management

Partnership with Department of Education to

- ▶ Promote the Teacher Acute Concussion Tool
- ▶ Update the REAP manual
- ▶ Update Concussion Guidelines for Iowa Schools

Partnership with University of Iowa Injury Prevention Research Center

- ▶ Evaluating adoption of concussion RTL plans and concussion policies

Preventing Falls

Partnering with the Iowa Falls Prevention Coalition, Iowa HHS Aging & Disability Division and Iowa Community HUB.

- ▶ Increase surveillance and reporting
- ▶ Increase screening and assessment for falls risk
- ▶ Increase referrals to evidence-based falls prevention
- ▶ Increase awareness and information



Questions?

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