Pennsylvania Legislative Brain Injury Caucus Committee

PREFACE:

From data gathered by the Centers for Disease Control and Prevention (CDC) it is estimated that over 100,000 Pennsylvanians suffer a brain injury each year, 70,000 of which are from trauma. There are also over 280,000 Pennsylvanians who are living with lifelong disabilities from Brain Injury.

These data do not include up to 160,000 residents who are suffering mild TBI (Concussions) who may or may not seek medical help. Nor do they include the untold number of veterans who are returning from current military assignments with brain injury.

Brain injury is, and should be a major concern for Pennsylvanians and should also be for any candidate seeking public office in Pennsylvania.

QUESTIONS FOR CANDIDATES FOR PENNSYLVANIA STATE OFFICES IN 2010

1. The Pennsylvania House of Representatives and Senate are considering a concussion bill (HB 2060 and SB 1241) to require education of student athletes, their parents, and coaches on the dangers of brain injury and to protect children from further injury after a sports concussion. The bills would require that if a player sustains a concussion or brain injury, they could not return to play unless cleared by a licensed health care provider. This is a crucial step in protecting our children from the debilitating injuries that can happen when they return to play too quickly. Increased awareness is the best way to prevent serious injury and make sure that the athletes speak up when they are hurt.

Would you support for such legislation?

2. In 2008 the Pennsylvania Department of Public Welfare (DPW) convened a Brain Injury Recovery Task Force to examine issues relating to services for children and adults with brain injury. The taskforce recommended creating a Bureau of Brain Injury Services. The Bureau would oversee services to people with brain injury in Pennsylvania and respond to the concerns of brain injury survivors, their families, and specialized service providers in Pennsylvania.

Would you support this effort and establish this Bureau?

3. Under a federal grant program administered by the United States Department of Health and Human Services a grant was awarded to the PA Department of Health to establish a state advisory board focused on planning for needs and improving coordination of resources for people with brain injury in Pennsylvania. The board does not have adequate scope or authority to address the issues of concern to families and survivors. For lack of a Brain Injury Advisory Board created in statute, Pennsylvania lost a federal brain injury grant after seven straight years of operation.

Would you support a bill to establish a PA Brain Injury Advisory Board?
4. More than 130,000 Pennsylvanians are living with a long-term disability resulting from TBI alone. The need for services and supports for people surviving brain injury is increasing. People of all ages with brain injury go without needed rehabilitation. Many are cared for by family who lack sufficient resource and support to help. Many are treated by professionals who lack the needed expertise in brain injury.

   Would you support the expansion of the Department of Health’s Head Injury Program, which is funded through the EMS Trust Fund, and the Department of Welfare’s CommCare Medicaid Waiver program to allow more people to be served in the community?

5. PA has earned national recognition for its federally funded BrainSTEPS program of volunteer teams across the state to assist schools in dealing with the issues faced by children returning to the classroom after brain injury.

   Would you support legislation to establish BrainSTEPS as a permanent joint program of the Departments of Health and Education?

6. Pennsylvania does not screen for brain injury before providing some significant state funded services. The selection and implementation of a screening tool would allow more appropriate diagnosis and treatment, prevent useless services, and promote a productive independent lifestyle.

   Would you work towards legislation/state funding to establish and implement the use of a standardized screening tool for persons receiving services through state funded programs such as Medicaid, The Office of Mental Health and Substance Abuse Services, the Office of Developmental Programs and the Department of Corrections?

Note: A number of the issues addressed, in this questionnaire, are based on the recommendations of The Brain Injury Recovery Task Force. This Task Force was commissioned by the Secretary of The Department of Public Welfare and their report was issued in the December 2008. Copies are available on http://www.dpw.state.pa.us/, search: Brain Injury Recovery Task Force

These questions are presented by the following organizations:

   Acquired Brain Injury Network of Pennsylvania
   ABIN-PA 1-800-516-8052
   Brain Injury Association of Pennsylvania
   BIAPA 1-866-635-7097
   Disability Rights Network of Pennsylvania
   DRN 1-800-692-7443
   Pennsylvania Association of Rehabilitation Facilities
   PARF 1-717-657-7608
Pennsylvania Legislative Brain Injury Caucus Committee

Manage Concussions in Youth Sports
Pass H.B. 2060 and S.B. 1241 Now!

The Pennsylvania General Assembly should pass legislation (H.B. 2060 in the Pennsylvania House of Representatives and S.B. 1241 in the Pennsylvania Senate) to make sure that we better manage concussions that happen in youth sports and increase awareness regarding their seriousness.

Representative Tim Briggs introduced H.B. 2060 in the House of Representatives and Senator Pat Browne introduced S.B. 1241 in the Senate. The bills would require that if a player sustains a concussion or brain injury, they could not return to play unless cleared by a licensed health care provider. This is a crucial step in protecting our children from the debilitating injuries that can happen when they return to play too quickly.

According to the Centers for Disease Control, as many as 3.8 million sports and recreation-related concussions occur nationally each year, and for Pennsylvania the figure could be as high as 156,000 concussions per year. One recent study found that while 15 percent of high school football players reported having concussion symptoms during the football season, only 47 percent of those players reported those symptoms to a school or team official.

The bills would require a student's parent or guardian to annually sign a concussion and head injury information sheet prior to the student's participating in practice or competition. Parents should be properly informed about the seriousness of concussions because increased awareness is the best way to prevent serious injury and make sure that the athletes speak up when they are hurt.

Protect our sons and daughters!

Pass H.B. 2060 and S.B. 1241 now!
While Pennsylvania is experiencing tough economic times and facing a severe revenue shortfall, the need for services and supports for people surviving brain injury is increasing.

We need a state budget that avoids any further cuts in programs that will hurt people surviving critical injury. We need a budget that offers people with severe disabilities the essential help that they need to live in the community.

The Pennsylvania House of Representatives has approved H.B. 2279, its version of the Fiscal Year 2010-2011 State Budget. This bill is nearly identical to the budget that was proposed by Governor Edward Rendell.

In H.B. 2279 spending for many programs would continue at levels below 2008-09. Health care and public safety would see only modest increases to meet increasing demands. Home and community based services that are especially designed for people with brain injury will be slightly increased.

H.B. 2279 would provide an additional $7 million to continue current program and annualize a previous expansion of community service. A total of $6 million would be provided for an initiative in long-term living system reform to provide home and community-based services to 744 additional individuals with disabilities as an alternative to institutional care. More than a hundred people with traumatic brain injury will be helped by this funding.

In the Department of Health (DOH), the budget for the Pennsylvania head injury program which provides case management services and post-acute head injury rehabilitation services to individuals with traumatic head injury would be increased by $450,000 – from $6,000,000 to $6,450,000. The legislature must approve the annual funding made available through the Catastrophic Medical Rehabilitation Fund portion of the Emergency Medical Services Operating Fund (EMSOF).

- We must maintain the funding for brain injury services at least at the levels proposed in H.B. 2279. Funding proposals that deny help to people who are struggling and who may be vulnerable to further harm must be rejected.
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Establish a Bureau of Brain Injury

In April 2008 the Pennsylvania Department of Public Welfare (DPW) convened a Brain Injury Recovery Task Force to examine issues relating to services for children and adults with brain injury. Over a six month period workgroups representing survivors, families, service providers, community organizations, and government agencies met to develop recommendations for DPW in order to improve, enhance, develop and/or coordinate services to positively impact the lives of children, adults, and families who are affected by brain injury.

In October 2008 the workgroups recommended creating a Bureau of Brain Injury Services. In addition to overseeing services to people with brain injury in Pennsylvania, the Bureau of Brain Injury Services would be responsible for successfully implementing the recommendations of the Brain Injury Recovery Task Force. The recommendation has been endorsed by advocates and groups representing brain injury survivors, their families, and specialized service providers in Pennsylvania.

The Bureau of Brain Injury Services would be responsible for addressing the critical and immediate needs of people with brain injury, such as those especially identified by the DPW Task Force and supported by stakeholders.

1. There is a need for more information and improved public awareness about brain injury and existing services.
2. There is a need for more support for brain injury survivors and their families.
3. Brain injury survivors need a seamless service delivery system so there are fewer gaps in services.
4. Medical professionals need more education about brain injury.
5. There is a need for greater effort by public systems to consistently identify children and adults with brain injury.
6. Brain injury survivors need more assistance in accessing provider services.
7. Brain injury survivors need a coordinated approach in service planning, treatment and community supports for people with brain injury.

Without the establishment of such a central office for these efforts as recommended by the PA DPW Brain Injury Recovery Task Force, the work of supporting individuals with brain injury across systems cannot move forward in an effective fashion.
AN ACT - Amending the act of March 10, 1949 (P.L.30, No.14), entitled "An act relating to the public school system, including certain provisions applicable as well to private and parochial schools; amending, revising, consolidating and changing the laws relating thereto," providing for management of concussions and head injuries.

The General Assembly of the Commonwealth of Pennsylvania hereby enacts as follows:

Section 1 - The act of March 10, 1949 (P.L.30, No.14), known as the Public School Code of 1949, is amended by adding a section to read:

Section 1606 - A - Management of Concussions and Head Injuries

(a) The association, in cooperation with the Department of Health, shall develop guidelines and other pertinent information and forms to inform and educate students involved in interscholastic athletics, their parents and their coaches about the nature and risk of concussion and head injury including the risks associated with continuing to play after a concussion or head injury.

(b) A student involved in interscholastic athletics and the student's parent or guardian shall annually sign and return to the student's school a concussion and head injury information sheet prior to the student's participating in practice or competition.

(c) A student who is suspected of sustaining a concussion or head injury in a practice or game shall be removed from play at that time. The student shall not return to play until the student is evaluated by a licensed health care provider trained in the evaluation and management of concussion and receives written clearance to return to play from that health care provider.

Section 2 - This act shall take effect in 60 days.
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SENATE BILL 1241 - PRINTER'S NUMBER 1714
THE GENERAL ASSEMBLY OF PENNSYLVANIA
SENATE BILL No. 1241  Session of 2010

INTRODUCED BY BROWNE, ERICKSON, WILLIAMS, LOGAN, GREENLEAF, M. WHITE, FONTANA, WASHINGTON, O'PAKE, COSTA, DINNIMAN, RAFFERTY, PILEGGI, BRUBAKER, ALLOWAY, TARTAGLIONE, FARNESE, PIPPY, WARD, LEACH, BOSCOLA AND MUSTO, MARCH 4, 2010

REFERRED TO EDUCATION, MARCH 4, 2010

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Brain Injury Statistics

Brain injury refers to the death of brain cells and disruption of neural pathways that change the way a person thinks, feels and acts.

Acquired Brain Injury (ABI) affects large numbers of Pennsylvanians. An Acquired Brain Injury is a brain injury caused by events after birth rather than as a result of a genetic or congenital disorder. These events include traumatic events (such as accident or injury leading to traumatic brain injury) and non-traumatic events (such as stroke, brain tumors, infection, substance abuse, etc.).

Acquired brain injury is an injury to the brain, secondary to trauma, stroke, postsurgical complications and certain acquired disease processes. TBI is caused by a direct blow to the head or being shaken violently. TBI may be caused by falls, motor vehicle crashes, bicycle accidents, sports and recreation injuries, shaken baby syndrome, gunshot wounds and assaults. The signs and symptoms of TBI can be subtle and may not appear until days or weeks following the injury or may even be missed.

• Mild TBI is often under-diagnosed or misdiagnosed, with symptoms not always immediately apparent. TBI is the leading cause of disability and death among children and adolescents.

• Most of the statistics collected on brain injury are those related to on traumatic brain injury (TBI) and stroke disease.

• There are approximately 10 million Americans living with brain injury, including stroke.

• The cost of treating, rehabilitating and caring for the victims of brain injury in the United States is approximately $30 billion each year.

• Approximately 1.6 to 3.8 million sports-related and recreation-related concussions occur in the United States each year. Nationally, children and youth 5 through 18 years of age accounted for 2.4 million sports-related emergency visits annually.

• A large number of Pennsylvanians are affected by these injuries to the brain.

• More than 130,000 Pennsylvanians are living with a long-term disability resulting from Traumatic Brain Injury (TBI).

• More than 50,000 Pennsylvanians are treated and released from emergency rooms for brain injury annually.
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- Seventy-five percent of all brain injuries are from concussion, which affects over 47,000 Pennsylvanians.

- There are 7,000,000 persons living with lifelong disability as a result of brain injury, 290,000 of whom live in Pennsylvania.

**Estimated Number of Acquired Brain Injuries per Year**

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<thead>
<tr>
<th></th>
<th>Nationwide</th>
<th>Pennsylvania</th>
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</thead>
<tbody>
<tr>
<td>Traumatic Brain Injury</td>
<td>1,700,000</td>
<td>70,000</td>
</tr>
<tr>
<td>Stroke</td>
<td>800,000</td>
<td>33,000</td>
</tr>
<tr>
<td>Total</td>
<td>2,500,000</td>
<td>103,000</td>
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These data do not include numbers of concussions that go untreated each year nor do they include any estimates of the number of members of our military who are returning to civilian life with the effects brain injury.