Federal TBI Program
More than 5.3 million Americans live with a disability as a result of a traumatic brain injury (TBI). Many of these individuals and their families are confronted with inadequate or unavailable TBI services and supports. Passage of the Traumatic Brain Injury Act of 1996 (PL 104-166) signaled a national recognition of the need to improve state TBI service systems. The Act authorized the Health Resources and Services Administration to award grants to States for the purpose of planning and implementing needed health and related service systems changes.

Lead State Agency
Department of Health, Injury Prevention Service

Oklahoma’s Grant History
Oklahoma has received $1,036,787 in Federal TBI Planning, Implementation, Post-Demonstration, and Implementation Partnership Grants. The State has matched the Federal grants with $537,258.

State Population and TBI
State population in 2004: 3,523,553
Est. TBI-related emergency department visits per year: 18,398
TBI-related non-fatal hospitalizations per year: 2,560
Est. TBI-related disability per year: 817

Note: State population is from the 2004 Census. TBI data are the number of individuals and are from the CDC TBI Surveillance Grant Program and NCHS data. The non-fatal hospitalizations number is from OK’s TBI Surveillance System.

Infrastructure-at-a-Glance: 1997-2006

<table>
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<tr>
<th>Advisory Council or Task Force</th>
<th>TBI Registry/ Surveillance</th>
<th>TBI Medicaid Waiver</th>
<th>Head Injury Division in State Department</th>
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<td>Added by 2006</td>
<td>Maintained or Regained</td>
<td>Lost by 2006</td>
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Grant Objectives
1. The overall goal is to: enhance the coordination, comprehensiveness, access, availability, and sustainability of services across the spectrum for all populations, age groups and injury severity, broaden collaboration with partners, consumers and providers statewide, further increase public knowledge, awareness, possible effects, establish/maintain information and resources directory for consumers, providers, and the public, and pursue a trust fund.

Progress
- Conducted first and second follow-up of children under 19 years discharged live to determine status, services referred to and needed; performing data analysis.
- Presented results of Assessment and Action Plan to state legislature which commended the plan and is urging agencies to work toward goals.
- Distribution of the Resources Directory table of contents has involved special education, EDs, hospitals, rehab centers, DHS, ILCs. A revised edition of the VR curriculum will be used in training 200 specialists in fall 2007.

Continuing Effort
Continued work is focused on maintaining system advances and improving service needs highlighted by new Assessment results. Collaboration with Special Education, rehab centers, support groups, and EDs. A study of individuals 5-7 years post severe injury was conducted with assistance of DHS to determine evidence of need of waiver. The legislature discussed inclusion of TBI in the ADvantage waiver but the proposal did not pass because of current long waits. Efforts for a waiver with DHS as lead agency will be maintained. Veterans services is a current emphasis. Avenues to obtaining a trust fund are being considered.

For Further Information
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