Alabama

IDTF
Annual Report
2001

Assistance for Alabamians With Spinal Cord and/or Traumatic Brain Injury

IMPAIRED DRIVERS TRUST FUND

October 1, 2000 - September 30, 2001

IDTF Advisory Board Annual Report

Prepared by:
Alabama Department
of Rehabilitation Services

Steve Shivers
Commissioner

STATE OF ALABAMA

IMPAIRED DRIVERS TRUST FUND

Serving People With Brain or Spinal Cord Injury

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Administered by:
ALABAMA DEPARTMENT OF
REHABILITATION SERVICES

STEVE SHIVERS
COMMISSIONER

January 4, 2002

Dear Legislator:

We are happy to share the accomplishments of the Impaired Drivers Trust Fund (IDTF) Advisory Board with you in this 2001 IDTF Annual Report. The quality of life of many Alabamians affected by traumatic brain injury (TBI) and/or spinal cord injury (SCI) has been improved by services and programs funded by the IDTF. We are particularly pleased this year with the cooperative relationship between the Alabama Department of Rehabilitation Services (ADRS) and the Alabama Department of Public Health (ADPH) to implement the Alabama Head and Spinal Cord Injury Registry that will assist in linking individuals with TBI and SCI to services.

The IDTF provides the much-needed funds for gaps in services for people in Alabama who have experienced TBI/SCI. However, just as important as the funding for services are the collaboration and coordination that exist among service providers and partners who are committed to developing a continuum of care and service options for people with TBI and SCI and their families.

The IDTF Advisory Board continues to provide leadership and encourage state agencies, private and community-based organizations to work cooperatively to maximize the use of existing resources and coordinate services to ensure maximum benefit from the IDTF.

Sincerely,

Steve Shivers
Commissioner
Alabama Department of
Rehabilitation Services

Ralph R. Norman III
Chairman
Alabama Impaired
Drivers Trust Fund

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Impaired Drivers Trust Fund

In 1992 the Alabama State Legislature established the Impaired Drivers Trust Fund (IDTF) in the state treasury and the Impaired DriversTrust Fund Advisory Board (Act 92-586). Since that time, the Impaired Drivers Trust Fund has evolved into a major advocacy and service-delivery system for Alabamians who have spinal cord injury (SCI) or traumatic brain injury (TBI).

The Legislature charged the Impaired Drivers Trust Fund Advisory Board with the responsibility of facilitating a comprehensive system of services for Alabamians with head and spinal cord injuries:

- investigating the needs of survivors with SCI or TBI,
- identifying gaps in services to these survivors,
- establishing guidelines for disbursing IDTF monies, and
- assuring maximum benefits from the IDTF.

The board established five committees to address long- and short-term developmental issues:

- Rules Committee - considers and proposes to the board amendments to the administrative rules of the IDTF
- Budget Committee - develops and submits to the board financial reports and budgets
- RFP Committee - develops requests for proposals, considers any proposals submitted and makes recommendations to the board
- Housing Committee - considers proposals submitted pursuant to the board's housing initiative and approves disbursement of funds under any housing initiative
- Legislative Committee - considers and advises the board on any proposed legislative issues that affect services or consumers of the IDTF programs.

In 1993 the Legislature passed ACT 93-323 which imposed an additional fine of $100 on persons convicted of driving under the influence of alcohol or drugs with proceeds from the fines allocated to the Impaired Drivers Trust Fund. Funds credited to the IDTF are to be used as payer of last resort for the costs of care provided to Alabamians who have survived neurotrauma with head or spinal cord injuries.

In January 1994 the IDTF Advisory Board issued a report to the Alabama Legislature providing results of a needs assessment and identifying gaps in services to citizens with head or spinal cord injuries. Consequently, six public hearings were held throughout the state to obtain citizens' input in identifying priorities and needs. As a result of these hearings, the IDTF Advisory Board established priorities and criteria for disbursement of monies in the fund.

The Alabama Department of Rehabilitation Services was designated by the Legislature to disperse monies from the IDTF in accordance with the priorities and criteria established by the board.

The advisory board, IDTF committees and the Alabama Department of Rehabilitation Services staff established systems and procedures to deliver services.

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IDTF partners with the

Alabama Head and Spinal Cord Injury Registry and Service Linkage System

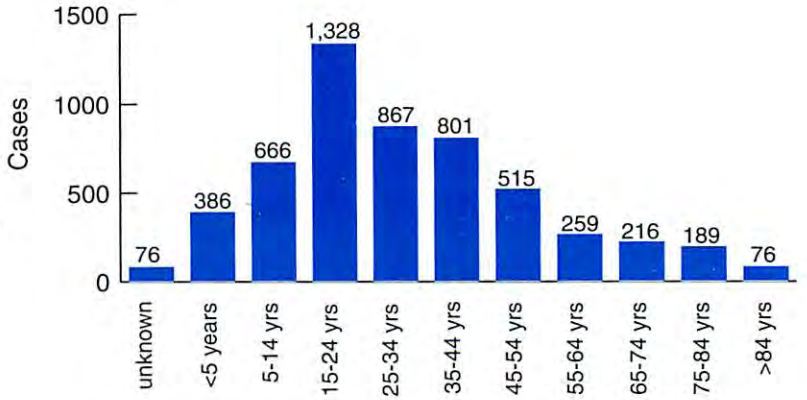
The Alabama Head and Spinal Cord Injury Registry (AHSCIR), established by Act 98-611, requires that all hospitals in Alabama report the names of individuals treated for traumatic brain injury (TBI) or spinal cord injury (SCI) to the Alabama Department of Public Health (ADPH). It allows the Alabama Department of Public Health to learn more about brain injury and spinal cord injury, develop programs aimed at preventing these disabling conditions, and make recommendations regarding improvement in current prevention and treatment methods. It allows the Alabama Department of Rehabilitation Services (ADRS) to contact individuals about the availability of information and resources for people who experience difficulties resulting from head and/or spinal cord injury. Development of the AHSCIR and Service Linkage System exemplifies how effective collaboration and coordination of resources among state agencies, private and public organizations and partners can improve the system of care in Alabama for people who have experience head and/or spinal cord injury. The Impaired Drivers Trust Fund supports this process as a collaborating partner and with funding.

ADPH Collects and Analyzes AHSCIR Data

The Alabama Department of Public Health (ADPH) has been collecting trauma data from six level I and level II trauma centers throughout the state since 1999. At the present time, all hospitals are not contributing data to the Alabama Trauma Registry (ATR) due to software installation requirements. Because ATR state data are maintained using the National Trauma Registry of the American College of Surgeons (NTRACS version 3.0) software, it has been necessary to focus efforts during 2000-2001 on installing this software in hospitals and training users. All hospitals required to submit data to the Alabama Head and Spinal Cord Injury Registry are expected to have this software installed in 2002.

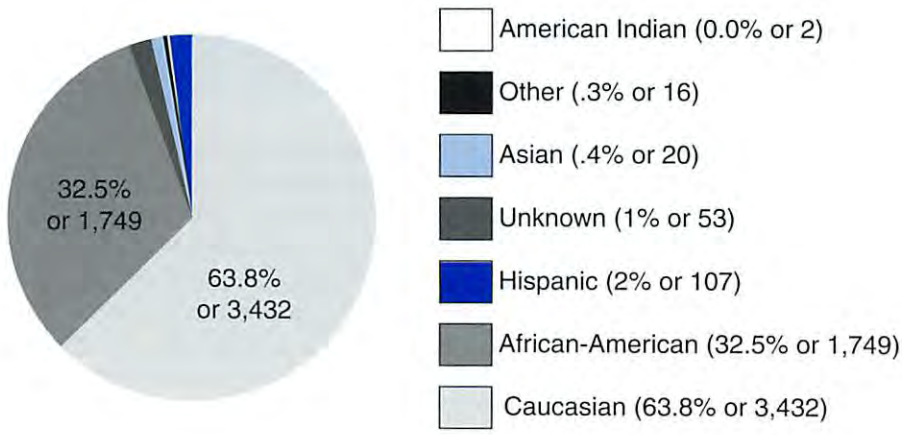
The Alabama Trauma Registry database has received data on 17,527 cases that satisfy the criteria for admission to the ATR. Of this number 5,379 cases were classified as head, neck, and spinal cord injuries. A broad demographic analysis of the data by ADPH shows that Alabama data reflect national trends. The concentration of individuals with TBI and/or SCI around the 15-24 year-old age group is expected and results in many years of lost productivity and increased cost of care (figure 1).

Figure 1: ASCHIR Cases by Age Group



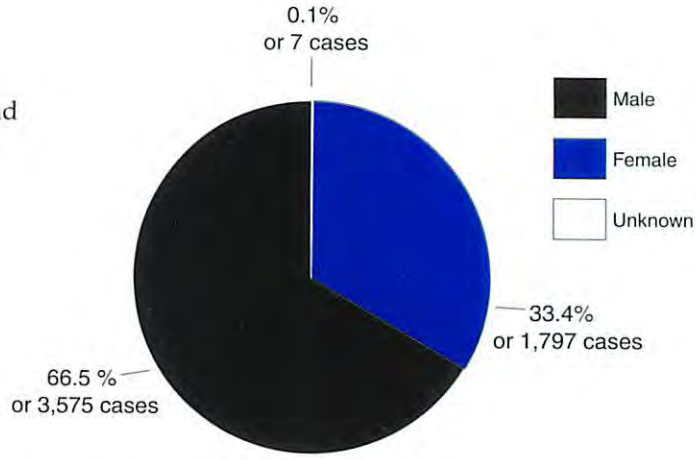
The African-American (AA) community suffers a disproportionate share of the injury burden with a ratio of 2.0:1 (Caucasian to AA) whereas the expected ratio is 2.8:1 (figure 2).

Figure 2: Ethnic Distribution of ASCHIR Cases



Males are twice as likely to suffer head and spinal cord injuries in the state, according to our data (figure 3).

Figure 3: Gender Distribution of ASCHIR Cases



The ADRS Service Linkage System: Linking People to Resources and Services

Often people with head and spinal cord injuries and their families cannot find solutions to the many difficulties they are experiencing. Valuable time may be lost in searching for assistance before locating it. ADRS, in partnership with ADPH, has implemented the AHSCIR Service Linkage System to link survivors of TBI and SCI and their families to much-needed community-based services. The system is designed to facilitate this process as soon as possible after individuals leave the hospital. Survivors who sustain moderate and severe head or spinal cord injuries are contacted by mail and given information about the Service Linkage System. They may call a toll-free number and speak with the service system coordinator who can provide assistance. Individuals may access a variety of services and information and are linked to resources based on their specific needs. The service system coordinator is also available to provide TBI-and SCI-related information and resources to professionals and service providers.

Service Linkage System Toll-Free Number

1-888-879-4706

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Service Components

The Impaired Drivers Trust Fund provides funding to implement the service components identified to address gaps in services to people with spinal cord injury and traumatic brain injury. These components include:

- The Alabama Head Injury Foundation Helpline 1-800-433-8002 - a toll-free telephone line to provide immediate information to callers
- Resource coordination - a service coordination program that helps consumers and their families find and implement the coordinated, community-based assistance they need
- The Interactive Community-Based Model (ICBM) - a five-phase rehabilitation program that focuses on the consumer's transition from the hospital to home to the community and ultimately to the workplace
- Housing assistance - help in processing applications for housing assistance and in implementing approved services for obtaining housing
- Personal assistance through the State of Alabama Independent Living (SAIL) Service - a program of support services to aid families in maintaining as independent a life-style as possible
- Extended support - job-related support services needed to maintain employment
- Respite care - services provided to intervene and relieve families of round-the clock responsibilities of caring for a consumer
- Recreation - opportunities provided for individuals with TBI or SCI to enjoy recreational activities, including attending camp

Prevocational Service-Delivery Model: Interactive Community-Based Model (ICBM)

Traumatic brain injury has far-reaching consequences not only for the individual, family and friends, but also for employers of people with head injuries. Most adults who survive severe head injury must re-evaluate their employment abilities, potential and goals.

The ICBM, originally funded in 1992 by a grant from the Rehabilitation Services Administration, was developed to help Alabamians with traumatic brain injury access community resources that would enhance their opportunities to work. It is a comprehensive rehabilitation program that focuses on the individual's transition from hospital to home to community and ultimately to the workplace. The gradual, often slow, process begins at home where ICBM care coordinators guide persons with traumatic brain injury and their families through a five-phase process of rehabilitation.

The ICBM has reduced the cost of post-acute care services for individuals with TBI and has reduced the time of referral to vocational rehabilitation by more than two-thirds of the national average. In addition, the average income of consumers who participate in the ICBM is 15 percent higher than those who do not.

The ICBM is now funded by the Impaired Drivers Trust Fund because of its success in assisting individuals in returning to maximum independence, enabling them to function in their community and in employment.

Six care coordinators located throughout the state served 207 individuals during the year.

Services available through ICBM include:

- Case management
- TBI education
- Individualized home-based program
- Community re-entry
- Neuropsychological evaluation
- Transportation
- Cognitive remediation

PROFILE: Bobby Arnold

by Karen S. Wisenbaker
TBI Care Coordinator
ICBM Program

Bobby Arnold has made a remarkable recovery from the severe traumatic brain injury he experienced three years ago at the age of 21. He was a young husband with two small children at home when on his way to work one morning his truck ran off the road and hit a concrete culvert. He was initially hospitalized in Montgomery and was transferred to the University of Alabama at Birmingham (UAB) Medical Center. After months of treatment and services at UAB and Spain Rehabilitation Center, he returned home and is now living with his parents.

Bobby was referred to the Interactive Community-Based Model (ICBM) for community reentry and prevocational services after he was discharged from Spain Rehabilitation Center. The ICBM care coordinator, Karen Wisenbaker, began working with him. Initially a daily schedule which included numerous cognitive activities was established. He was provided with cognitive training supplies, TBI education, supportive counseling, and coordination with the Alabama Head Injury Foundation (AHIF) for participation in a support group. Bobby attended physical therapy sessions provided by his insurance and speech therapy sessions that were arranged with a local speech and hearing clinic at no cost. His mother worked with him every day, several hours a day, discussing news events, playing games, orienting him to his schedule, and providing the critical family support and encouragement he needed to accomplish his tasks. As Bobby progressed in his recovery, he began to perform household chores, prepare light meals or snacks, and walk without a cane. During Bobby's participation in the ICBM, he was re-evaluated at intervals by his neuropsychologist, who was amazed by the progress he was making.

When Bobby was ready to begin preparation for returning to employment, he was referred to Susan Hawk, vocational rehabilitation counselor, who provided vocational evaluation, work adjustment training and assistance with job placement. A driving evaluation, which Bobby did well on, was provided through the ICBM.

As a result of the services provided by the ICBM and vocational rehabilitation, Bobby is now working thirty hours a week as a concessions worker at the Montgomery Zoo. Mr. Lizenby, Bobby's boss, says Bobby has a job for life as far as he is concerned. He says many people have commented about how helpful and courteous he is. "He is a real asset in dealing with customers at the zoo."

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Bobby is very happy to be working again—something which seemed like an impossible dream after his accident. His desire and drive to improve his cognitive functioning and physical abilities have made this possible.

Bobby, his mother, and his father continue to be active participants and supporters of the local Alabama Head Injury Foundation support group that is led by AHIF Family Resource Coordinator Nancy Harrison.

Services utilized by Bobby included:

- case management
- supportive counseling
- cognitive training supplies and activities
- support group participation
- transportation assistance
- neuropsychological evaluation
- SSI/SSDI benefits counseling
- physical therapy
- speech therapy
- driving examination
- physical and visual follow-up visits
- work adjustment program
- job placement
- TBI education
- daily schedule

Terry is very happy to be working again!

Bobby and TBI Care Coordinator Karen Wisenbaker

Alabama Department of Rehabilitation Services Vocational Rehabilitation TBI Care Coordinators

Areas and Counties Served

AREA I
Jan Humphries
621 Cherry Street, NE
Decatur, AL 35601
(256) 353-2754
1-800-671-6838
Fax: (256) 351-2476
Counties Served: Colbert, Cullman, Franklin, Jackson, Lauderdale, Lawrence, Limestone, Madison, Morgan

AREA II
Carol Pinkard
236 Goodwin Crest Drive
Birmingham, AL 35219
(205) 290-4400
1-800-671-6837
Fax: (205) 290-0486
Counties Served: Blount, Chilton, Jefferson, Shelby

AREA III
Rena Kiel
1305 37th Street, East
Tuscaloosa, AL 35405
(205) 554-1355
1-800-331-5562
Fax: (205) 554-1369
Counties Served: Bibb, Fayette, Greene, Hale, Lamar, Marengo, Marion, Perry, Pickens, Sumter, Tuscaloosa, Walker, Winston

AREA IV
Karen Wisenbaker
2127 East South Boulevard
Montgomery, AL 36116
(334) 288-0220
1-800-441-7578
Fax: (334) 281-1388
Counties Served: Autauga, Barbour, Bullock, Butler, Chambers, Coffee, Conecuh, Covington, Crenshaw, Dale, Dallas, Elmore, Geneva, Henry, Houston, Lee, Lowndes, Macon, Montgomery, Pike, Russell, Tallapoosa, Wilcox

AREA V
Nadine Dunn
1100 George Wallace Drive
Gadsden, AL 35903
(256) 547-6974
1-800-671-6839
Fax: (256) 543-1784
Counties Served: Calhoun, Cherokee, Clay, Cleburne, Coosa, DeKalb, Etowah, Marshall,Randoph, St. Clair, Talladega

AREA VI
Ron Haynes
2419 Gordon Smith Drive
Mobile, AL 36617
(334) 479-8611
1-800-671-6842
Fax: (334) 471-6018
Counties Served: Baldwin, Choctaw, Clark, Escambia, Mobile, Monroe, Washington

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Resource Coordination

A traumatic brain injury or a spinal cord injury can happen to anyone at any time. Because of the wide range of services and treatment options that Alabamians with traumatic brain injury and spinal cord injury may require, service coordination is critical. More than 1,000 individuals with TBI or SCI and their families have been served by the Alabama Head Injury Foundation through funding from the Alabama Impaired Drivers Trust Fund. The IDTF established a *family service coordination program* through *family service centers*, now located in 10 areas across the state, to help individuals with TBI/SCI and their families find the coordinated, community-based assistance they need. *Resource coordinators* located at the centers provide community information, referrals, advocacy, housing, respite care, support group development and public awareness activities.

PROFILES: Mr. W and Mrs. C

by Roberta Jackel
AHIF Resource Coordinator

Through resource coordination, 10 AHIF resource coordinators, funded by the IDTF, served over 1,200 individuals/families with TBI and/or SCI during FY 2001. As Roberta Jackel, Auburn coordinator, so aptly explains, resource coordination is more than connecting the client with resources.

> "As an AHIF resource coordinator, I am always aware of possibilities. Everyone needs to feel that there are options or possibilities, particularly people with disabilities. To feel otherwise is to be without hope. The last thing that I would want to do is to take away a consumer's hope. Instead, I strive to bring a new dimension of hope to the consumer's world."

Mr. W is a sixty-one-year old served by Ms. Jackel in the Auburn area. He was referred to AHIF by a local home health agency. Previously he had

worked 33 years up North and had finally managed to own a small home, a truck and a fishing boat. Four years ago he was walking to the grocery store and slipped on a icy sidewalk and sustained an incomplete spinal cord injury. Mr. W was initially paralyzed from the neck down.

"They operated and put my bones back together with screws and a plate," Mr. W remembers. "The doctors said I would probably not walk again." Funded by private insurance, Mr. W spent about a year in a rehabilitation center. As a result of that therapy, Mr. W could ambulate with a walker.

In August Mr. W moved back to his boyhood town of Auburn to live with his mother. When Ms. Jackel visited Mr. W in his mother's home, he was hoping his insurance company would cover additional therapy that would enable him to walk independently. Mr. W expressed a desire to live in his own place as he was having occupational therapy to help him become more proficient with his activities of daily living.

Since his move to Auburn, Mr. W had been spending his days either sitting in the living room or on the front porch. He had no transportation and was dependent on his siblings to go anywhere. Ms. Jackel called the Lee County public transit system and obtained an application for specialized bus service for Mr. W.

According to Mr. W, he was an active and sociable man before his accident. Ms. Jackel began to make arrangements for him to attend the senior day program which happened to be just minutes from his house. Ms. Jackel obtained Mr. W's permission to give his name to the Lee County DHR, which handles the application process for the Senior Center. As a result of her efforts, the DHR worker visited Mr. W and said that he was eligible for the senior program. Once Mr. W's doctor returns the medical form to DHR, he can start attending the program, and their bus will provide transportation.

Again, Mr. W's thoughts turned toward living independently. Ms. Jackel found a nearby apartment complex that had a number of subsidized units. Although Mr. W was not ready to complete an application, Ms. Jackel encouraged him to get on the waiting list.

Mr. W is anxious to be as independent as possible, but he wants to take things slowly. He is very grateful to Ms. Jackel for her assistance and says she was the first person since he moved to Auburn who has given him encouragement and hope for a different way of living.

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Terrie Causey is the resource coordinator in the Dothan area. She explains that resource coordination cannot occur in a vacuum. It is a collaboration between service providers, the community and the family. The following example illustrates her efforts.

Mrs. C. is a thirty-one-year-old female who sustained a traumatic brain injury when she was thrown from a moving vehicle. A mother of two small children, she was dependent on her mother for all of her care giving. She was fed through a feeding tube and required twenty-four-hour care. She was referred to Ms. Causey by the hospital to see if she would assist in getting Mrs. C into a rehabilitation hospital in the local area. Mrs. C. had no insurances or financial resources.

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Ms. Causey was able to get Mrs. C placed on a waiting list at the local rehabilitation hospital for a scholarship bed. Ms. C was discharged from the hospital to a nursing home until the scholarship bed became available. Her mother was very determined to learn to take care of her and to get her home. She visited her everyday from early morning until bedtime and became a great advocate for her.

HealthSouth Rehabilitation Hospital in Dothan admitted this young woman one month after she went to the nursing home. She received scholarship services for approximately six weeks, which would have cost $40,000 without the assistance of this coordinator. At discharge she went home with her mother who had received education and training to help her care for her loved one.

It took a lot of collaboration among local service providers in the community to get this client ready to return to her mother's home. Her mother lived in a mobile home that had to have a ramp to be accessible. Ms. Causey contacted a local contactor and he agreed to build the ramp for the cost of materials. Ms. Causey applied to Individual and Family Supports to pay for the cost of the materials. They graciously agreed. She contacted a medical supply company and they agreed to donate an app pump for her bed and numerous medical supplies. Ms. Causey referred the family to the SAIL Homebound program which opened the case and provided services.

With assistance from the AHIF resource coordinator, SAIL Homebound, and the education and support provided by HealthSouth Rehabilitation in Dothan, Ms. C continues to improve daily, and most importantly, has returned to her loving and committed family, thus avoiding residence in the nursing home.

"As AHIF resource coordinators, we serve as connectors to resources and as facilitators. We try to see each new consumer that we serve as an individual, not just another case. We assist each consumer in assessing his or her strengths and weaknesses and particular needs and circumstances. We allow each consumer as much autonomy and decision making as possible. Many consumers have little control over their minds or bodies, so it is most important that they feel that they are in control in other ways. If an individual's hope can connect and fuse with concrete options, the possibilities become realities that can make a real difference in the consumer's life. Our goal is to facilitate that difference."

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Alabama Head Injury Foundation Community Support Network

Family Resource Coordinators

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Employment Opportunities through IDTF Extended Support

The primary method of serving individuals who need intensive supported employment services in order to perform work is through the utilization of a job coach who goes to the work site with the consumer and provides direct training on real job tasks. Job coach funding is available through the Alabama Department of Rehabilitation Services, but federal law restricts the department to a maximum of 18 months of on-site job coaching; therefore, a state or local source of funding for the provision of extended services is vital to ensure employment success. The Impaired Drivers Trust Fund provides that source of funding.

PROFILE: Terry Self

by Beth Creech
Job Coach

Terry Self is grateful for the funding provided by the Impaired Drivers Trust Fund and the Alabama Department of Rehabilitation Services' Vocational Rehabilitation Service. It has been an investment that has provided dividends not only to Terry but also to the state. The IDTF has paid an average of $250 annually to help maintain Terry's employment. In turn, that has allowed Terry to contribute approximately $1,000.00 in state taxes each year.

When Terry and his mother first contacted Vocational Rehabilitation Service in 1996 following his traumatic brain injury, he had one goal in mind—to return to work. Terry benefited from a variety of services funded by the IDTF and ADRS. He first received services from the Interactive Community-Based Model (ICBM) where a plan was developed with him that would prepare him for a vocational rehabilitation program. These services included speech therapy, occupational therapy, exercise, support groups at ADRS' Lakeshore facility, supervised volunteer work experiences, a driving evaluation, neuropsychological testing, TBI education, and counseling and guidance. The ICBM care coordinator, along with Terry's vocational rehabilitation counselor, Lisa McLaughlin, monitored his progress and transition to a vocational rehabilitation program that would lead to employment.

Once Terry entered the vocational rehabilitation program, he underwent vocational testing, medication evaluation and management, job coaching and

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job placement. When Terry was ready for the job search, the TBI job coach assisted him in identifying employment that would be a good match for his skills. Terry and the job coach worked on job readiness, filling out applications and interviewing skills. As a result of their efforts, Terry was hired by Wal-Mart as a maintenance assistant.

With help from his job coach and the staff at Wal-Mart, Terry began working thirty-five hours per week. The job coach helped Terry develop a consistent work routine, stay on task and prioritize job duties. The job coach also worked with Terry's supervisor to identify effective methods of assisting Terry to perform his work well.

Job retention was an important issue, and it was determined that Terry would benefit from post-placement support. The job coach, counselor, and Terry chose an extended support provider who was familiar with disability and work issues. The cost of extended support was paid for by the Impaired Drivers Trust Fund. Extended support was essential for Terry to maintain successful employment.

In June of this year, after completing two years of successful employment with Wal-Mart, Terry contacted his vocational rehabilitation counselor expressing a desire to try new challenges. Terry had worked at a local hospital prior to his accident and had a long-term goal to return to that environment. "I liked my job at Wal-Mart, but I was ready to move further ahead in my employment goal."

The TBI job coach met with Terry on his days off from Wal-Mart, and together they contacted potential employers, completed applications and practiced interviewing. With the experiences and skills he has acquired, Terry interviewed with Children's Hospital and has been offered a position as a floor technician. Initially, as was done in Terry's past, the TBI job coach will work with him to learn his new job requirements. Once Terry and his job coach determine that he has reached the level of job functioning that is necessary to be successful, the services of the extended support provider will be requested again. They will follow-up weekly to ensure that Terry continues to perform the quality work he has displayed in his previous employment as well as address any issues or questions the new employer may have regarding Terry.

Because of a stable work history and good work habits, Terry will see a significant raise in his income along with an extensive benefit package. He will be able to give back even more to the state in his new employment. Extended support funded by the Impaired Drivers Trust Fund and Vocational Rehabilitation Service provide a seamless system of services which has helped Terry achieve another step up the ladder of employment success.

Terry and former job coach, Ashley Townsend

Personal Assistance: family education and support service through State of Alabama Independent Living (SAIL) Service

Every year special funding from the Impaired Drivers Trust Fund enables individuals with spinal cord and/or traumatic brain injuries to receive the services needed to allow them to remain in their homes rather than become institutionalized. The State of Alabama Independent Living (SAIL) teams across the state coordinate services such as attendant care and assistance with securing medical supplies, assistive devices and durable medical equipment. The teams provide services that these individuals would not be able to purchase on their own. The provision of these many services promote independent living and enhance the quality of life for individuals with disabilities.

Waiver Case Manager Karen Coffey; VR Counselor Janice Creel, Independent Living Specialist Renee Hathcox, and Jamie

PROFILE: Jamie Smitherman

by Karen Coffey
Case Manager/Counselor
SAIL Program

Jamie Smitherman began working with the Alabama Department of Rehabilitation Services when she returned to high school following a car crash that left her with a complete cervical spinal cord injury affecting all four limbs (quadriplegia). Jamie was sixteen years old at the time of her accident. After undergoing many surgeries and physical therapy, Jamie returned to Boaz High School where she was introduced to Janice Creel, the transition vocational rehabilitation counselor. Ms. Creel recognized Jamie's need for specialized services and referred her to the SAIL program. In 1995 Jamie was admitted to the Homebound Program that assisted her with medical supplies and attendant care while her parents worked. Other services were provided by Independent Living Specialist Renee Hathcox and Alabama Head Injury Foundation Resource Coordinator Sandy Kiplinger.

Jamie graduated from Boaz High School, and with the assistance of Vocational Rehabilitation, she entered Snead State Community College in Boaz. She attended this institution for two years and was rewarded for her academic achievements. Jamie currently is enrolled in Faulkner State University's distance learning college program and does her class work via the Internet. She plans to major in a field of study that will allow her to work as a children's advocate. As a trained peer counselor, she works diligently with other people with disabilities in Marshall county. Jamie's courage and strength are an inspiration to everyone who is fortunate to know her.

Jamie continues to receive services from the Homebound Waiver through SAIL. Karen Coffey, her case manager, provides assistance with daily personal care and medical supplies. Case management from SAIL ensures that Jamie has the care that she needs. Currently, SAIL is in the process of making Jamie's home more accessible for her wheelchair by widening doors and making bathroom modifications. Jamie is just one of many Alabamians who benefit from the SAIL program.

Jamie and her father

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Recreation/Camp

The Alabama Head Injury Foundation had a total of 68 campers attend our two camp sessions at beautiful Camp ASCCA! This year we had many new campers. And with new campers comes new experiences! Some of the many fun activities enjoyed were horseback riding, arts & crafts, tubing, pontoon boat rides, swimming, SCUBA, cross-bow archery, fishing, and riflery.

Our two *All Around Best Camper* awards went to Johnny McCaghren of Pelham and Becky Snead of Hoover. Both Johnny and Becky were attending camp for the first time. Johnny was particularly fond of the adventure activities. He zipped down the zip line every time it was open! Becky enjoyed most all of the water activities and always had a smile on her face.

One of the evening activities was a talent show in Camp ASSCA's new outdoor amphitheatre overlooking the lake. Some of the talents campers shared were magic tricks, comedy, singing, poetry, and gymnastic feats. Many of the campers talents were so touching, there was not a dry eye in the audience.

On the last days of camp, everyone—campers and volunteers alike—were hugging, crying, smiling, and exchanging phone numbers and addresses to keep in touch with new friends until next year.

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2001 IDTF Stats

IDTF report of services provided by Alabama Head Injury Foundation

Resource Coordination

Clients Served---------1,254

TBI	SCI	TBI/SCI
781	422	51
62%	34%	4%

Client Services

Service Category	Hours of Service Provided	
Connecting clients with helpful resources	8,651	(84%)
Client intake, casework, correspondence, etc.	941	(9%)
Providing emotional support	386	(4%)
Educating clients and families	226	(2%)
Other client services	100	(1%)

Total Hours---------- 10,304

Awareness and Education

Support Group Meetings, Picnics - 142 events (audience of 2,199)
Community Presentations on TBI/SCI - 137 events (audience of 3,883)

Local Client Assistance---------- $575,151
(for clients' use for food, medicine, utilities, rent, clothing, etc. from sources such as churches, civic clubs, local businesses, private donors, and social service agencies)

Helpline
(Information & Resources)

Number of Calls----------787

Professionals	Consumers/Families	Others
335	418	34

Categories of Information Provided and Requests for Each

Traumatic Brain Injury	149	Statistics	3
Spinal Cord Injury	20	AHIF Services	479
Legal Information	21	Transportation	18
School/Education	26	Equipment	38
Recreation	37	Employment	23
Substance Abuse	9	Emotional Support	153
Behavioral	60	Prevention/Safety	9
Coma	17	Rehabilitation/Therapy	24
Pediatric TBI	20	Day Programs	23
Housing/Accessibility	83	Home Health Care	11
Financial	111	Other	146

Total Information Requests - 1,480

Referrals

Hospital/Rehab Facilities	46	Social Security Administration	26
Center for Independent Living	17	Legal Resources	19
ADRS/ICBM Program	21	Medical Resources	46
ADRS/Vocational Rehab Program	23	Individual & Family Support	21
ADRS/SAIL Program	30	Local Agencies/Organizations	94
ADRS/Children's Rehab Program	28	Local Support Groups	179
ADRS/Other	6	AHIF Resource Coordinators	35
Ala. Dept. of Human Resources	16	Recreation Programs	185
Ala. Dept. of Public Health	10	BIA/Other State BIA	42
Educational Resources	7	Other	136
Ala. Dept. of Mental Health/MR	19	Other Referrals	100

Total Referrals ----------1,006

Financial Assistance/Case Stats

Social/Recreational

Clients Served: 151

Birmingham	17
Calhoun County	9
Walker County	11
Tuscaloosa County	8
Huntsville	6

Days of Service: 708
Units of Service: 3,165

Housing Assistance

(Accessibility Modification and Structural Repairs)

Clients Served: 36
TBI: 20
SCI: 14
TBI/SCI: 2

Financial Assistance Provided: $268,899
Average Per Client: $7,469

Camp

(Traumatic Brain Injury Camp)

Camp Sessions: Spring (May)
Summer (August)

Total Campers with TBI: 68
Family and Volunteers: 87

Respite Care

Families Served: 78
TBI: 49
SCI: 27
TBI/SCI: 2

Respite Hours Provided: 6,166
Total Vouchers Paid: $71,401

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Advisory Board Members

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Sandra Nicolson, Vice Chair

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Judi Adamson

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Tim Cain

Russ Fine

Scott Beason

Jack Hataway

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Steve Shivers

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Kent Hunt

Graham Sisson

Sylvester Smith

Supporting Departments and Agencies

Alabama Coalition of Citizens with Disabilities
Alabama Department of Education/Special Education Services
Alabama Department of Human Resources
Alabama Department of Insurance
Alabama Department of Mental Health and Mental Retardation
Alabama Department of Public Health
Alabama Head Injury Foundation
Alabama Head Injury Task Force
Alabama Hospital Association
Alabama House of Representatives
Alabama Medicaid Agency
Alabama State Senate
Developmental Disabilities Planning Council
Epilepsy Foundation of North & Central Alabama
The Governor's Office
Medical Association of Alabama
UAB Injury Control Research Center

Alabama Department of Rehabilitation Services

Steve Shivers
Commissioner

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Alabama Department
of Rehabilitation Services