

Testimony of Larry Swift

Texas Sunset Commission
Testimony of Larry Swift, Member, Texas Traumatic Brain Injury Advisory Council
June 25, 2014

Chair, members, Thank you for the opportunity to share some thoughts about the health and human services agencies.

My name is Larry Swift. I have a daughter who sustained a serious brain injury in May 1993, 21 years ago. I am a member of the Texas Traumatic Brain Injury Advisory Council.

- Former Governor George Bush established the Texas Traumatic Brain Injury Advisory Board in 1997
- House Bill 2019 (78th Legislature) established the Texas Traumatic Brain Injury Advisory Council in statute effective September 1, 2003
- The Texas TBI Advisory Council is supported by the Office of Acquired Brain Injury (OABI), a part of the Texas Health and Human Services Commission. The Office of Acquired Brain Injury was established and funded by the 80th Legislature.

The Legislature requires the Texas Traumatic Brain Injury Advisory Council to:

- (1) inform state leaders of issues and policies as they relate to meeting the needs of persons with a traumatic brain injury and their primary family caregivers;
- (2) recommend to state leaders policies and programs that more effectively serve persons with a traumatic brain injury and their families;
- (3) recommend to the department methods to explore and promote innovative approaches to providing services and support to persons with a traumatic brain injury and their families;
- (4) recommend to the department methods to promote education, training, and information about traumatic brain injury issues;
- (5) advocate for persons with a traumatic brain injury and their families;
- (6) recommend to the department methods to support activities aimed at reducing preventable brain injuries; and
- (7) recommend to the department methods to conduct outreach to obtain public input.

Added by Acts 2003, 78th Leg., ch. 1088, Sec. 2, eff. Sept. 1, 2003 (HB2019).

HHS Agencies

I applaud the work of the Sunset Commission staff in their analysis and recommendations for the four health and human services agencies. I could not help but note that brain injury is hardly mentioned. Traumatic brain injury is a major cause of death and disability in Texas. Due to the life saving techniques of modern medicine, there is a large and growing population of individuals with brain injury. In Texas it is estimated that 144,000 individuals sustain a TBI each year, and as of 2007, approximately 479,000 Texans were living with TBI-related disabilities. Every four minutes a Texan sustains a traumatic brain injury, every half hour a Texan is hospitalized with a traumatic brain injury, every 80 minutes a Texan is permanently disabled by a traumatic brain injury. These figures do not include the military personnel and veterans returning to Texas disabled by traumatic brain injury. It is imperative that the health and human services agencies address the needs of the people they are serving who have sustained brain injuries.

Department of Assistive and Rehabilitative Services (DARS)

Department of Assistive and Rehabilitative Services is the only state agency that has a program focused specifically on treating individuals with traumatic brain injuries, the Comprehensive Rehabilitation Services program.

However, the other DARS programs also serve individuals with brain injuries. Blind services, vocational rehabilitation, and independent living programs all serve individuals with brain injuries, but how many and how well they are served are unknown. The table on page 13 shows that 22,056 individuals have a "physical or neurological disability." How many of the neurological disabilities result from a brain injury. How many individuals with intellectual impairment, mental or emotional impairment, or who are deaf or hard of hearing, blind or visually impaired also have a brain injury or have the impairment as a result of a brain injury. Traumatic brain injury is lumped in "other disability" along with chronic disease and substance abuse.

Department of State Health Services (DSHS)

Brain injury is virtually not mentioned in the report even though the CDC identifies traumatic brain injury as a "major public health problem." The only mention of traumatic brain injury is in Appendix F, where a reporting requirement for the Texas Traumatic Brain Injury Advisory Council is identified. This is a remnant of TBIAC receiving administrative support from DSHS. This reporting requirement should be moved to HHSC which now provide administrative support to the Texas Traumatic Brain Injury Advisory Council.

DSHS is required by statute to maintain a traumatic brain injury registry. (Health and Safety Code, Title 2, Chapter 92.) While considerable attention is given to the Texas Health Care Information Council in Issue 7 (p. 79), no mention is made of the Environmental Epidemiology and Disease Registries Section which does significant data collection, analysis and reporting. This section is responsible for the EMS and Trauma registries.

In the discussion on mental health, nothing is said about brain injury. Brain injury is often cause for mental health problems or co-occurs with mental health problems. Local authorities often will not serve individuals with brain injuries because it is outside their mandate. Many patients in State Hospitals have brain injuries.

My daughter was committed to the Wichita Falls State Hospital in 2012 for severe behavior challenges. She was there for a year and, fortunately, was in a unit headed by a psychiatrist with significant experience treating patients with brain injury. My daughter was discharged after a year because she was doing so well, in fact, she was in the best shape physically, mentally and emotionally, she has been in for years.

Department of Family and Protective Services (DFPS)

Brain injury is not mentioned in the report.

Many of the abused children and adults may have sustained traumatic brain injuries as a result of their abuse. Likewise, many abusers may have suffered traumatic brain injuries with resultant violent behaviors. We don't have a good handle on either side of this equation and will not until Department of Family and Protective Services systematically identifies its clients with traumatic brain injury.

Department of Aging and Disability Services (DADS)

Brain injury is not mentioned in the report on the state's long-term services and supports agency.

There is no mention of cognitive rehabilitation therapy even though the 83rd legislature appropriated \$1.9mm for the biennium for to be included in home and community based services waiver programs - in DADS' HCS and CLASS waivers and in HHSC's Star+Plus waiver.

Many individuals with brain injuries are served in the waiver programs as well as in Intermediate Care Facilities for Individuals with Intellectual or Developmental Disabilities and nursing facilities.

Recommendations

1. Have Agencies screen all new clients for brain injury.
2. Have Agencies identify current clients with brain injury.
3. Have the Health and Human Services Commission Strategic Decision Support coordinate screening and identification to insure data consistency.
4. Have Agencies develop plans for insuring that individuals with traumatic brain injuries receive the services they need.
5. Adequately fund DSHS TBI registry
6. Adequately fund the Office of Acquired Brain Injury to carry out its mission and to support the Texas Traumatic Brain Injury Advisory Council

