Alabama System of Care for People with Traumatic Brain Injury CHRONOLOGICAL EVENTS OVERVIEW July 2019

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1981	Alabama Department of Rehabilitation Services establishes Alabama State Head Injury Program (ALASHIP) at Lakeshore Rehabilitation Facility to provide vocational rehabilitation services for individuals with TBI.
1983	Alabama Head Injury Foundation established.
1989	Commissioner, Alabama Department Rehabilitation Services (ADRS) establishes state head injury coordinator position to oversee and coordinate services and programs, to develop and maintain cooperative agreements with agencies and organizations and to recommend policies to enhance service delivery for people with TBI and their families.
1989	Alabama Head Injury Task Force established by the Commissioner of the Department of Rehabilitation Services to develop the ideal service delivery system for individuals with of brain injury.
1989	Task Force members hold educational/training seminars throughout the state.
1989	Department of Rehabilitation Services Commissioner establishes a TBI Work Team comprised of individuals with traumatic brain injury, family members, rehabilitation professionals, and medical personnel and social services providers to develop a service delivery model to address problems with traditional vocational rehabilitation services for people with traumatic brain injury. The Interactive Community Based Model (ICBM) is developed to decentralize and provide community re-integration services in local communities.
1990-92	ICBM is implemented as a pilot project in three locations in the state of Alabama.
1991	"Statement of Principles of Cooperation" between ADRS and AHIF is signed.
1991	Jacksonville State University Family Survey is carried out.
1992	The Department of Rehabilitation Services and the University of Alabama Birmingham (UAB) are awarded a Rehabilitation Services Administration grant establishing the Southeastern Comprehensive Head Injury Center (SCHIC) comprised of five components: Prevention, Trauma/Acute Care, Medical Rehabilitation, Pre-vocational and Vocational Rehabilitation and Survivors/Family Support.
1992	Alabama Head Injury Foundation conducts a Membership Survey of needs.
1992-95	SCHIC components provide training and technical assistance for states is Region W. The ICRM, the contempose of the SCHIC is implemented throughout the

other TBI state association in capacity building initiative.

State of Alabama. The Alabama Head Injury Foundation develops the

IV. The ICBM, the centerpiece of the SCHIC is implemented throughout the

Community Support Network, a long term case management model, and assists

1992-93 Legislature creates the Impaired Drivers Trust Fund (IDTF) Advisory Board through Act #92-586 designating specific agencies and organizations to the Board. Board is instructed to investigate needs of citizens with head injuries and spinal cord injuries, identify gaps in services, issue a report to the legislature, and establish priorities and criteria for disbursement of monies. The Department of Rehabilitation Services is designated to expend monies in accordance with priorities established by Board.

Board conducts study of other states' programs, undertakes literature review, and surveys in-state providers, agencies and organizations. Birmingham Southern College Service Provider Survey of Needs is conducted for IDTF Board.

Legislature imposes additional \$100 fine on persons convicted of DUI offense through Act #93-326 and establishes Impaired Drivers Trust Fund as payer of last report. Funds accumulate to be expended October 1, 1994. Administrative rules and regulations are adopted by the Board.

IDTF Board conducts public hearings throughout the State for input from consumers.

IDTF Board issues report to legislature identifying needs with recommendations for services and programs.

1994-95 Department of Rehabilitation Services, Alabama Head Injury Foundation and others develop and implement programs with advice and oversight by the IDTF Board.

Statewide service coordination, personal assistance/homebound services, recreation/camp program, extended job-related support, respite care and housing are funded.

- 1995-96 Continuation of development and implementation of services and programs funded by the IDTF. IDTF provides funding to continue the ICBM when RSA funding ends. Cooperative effort between the IDTF Board and Department of Health to establish neurotrauma registry.
- 1996-97 The Department of Rehabilitation Services and UAB receive extension of RSA funding to establish the Comprehensive Head Injury Center-National located at UAB.
- "Small Places", a TBI recreational program is established in Birmingham by the Alabama Head Injury Foundation.
- 1997 Alabama Department of Rehabilitation Services is designated State Agency for TBI by Governor Fob James.
- ADRS receives federal TBI State Demonstration Grant under Maternal and Child Health/Children with Special Healthcare needs to establish ICBM for children with TBI.

1998	Alabama Head and Spinal Cord Injury Registry Act enacted by the Alabama Legislature.
1998	UAB is funded as a Model Center in Traumatic Brain Injury by NIDRR.
1999	Alabama Department of Health and Alabama Department of Rehabilitation Services establish procedures for implementing the Alabama Head and Spinal Cord Injury Registry.
1999	Alabama Head and Spinal Cord Injury Registry Advisory Council is appointed by the State Health Officer
1999	"Small Places" program expands to sites in Calhoun and Walker County.
1999	AHIF and Accessible Space, Inc. begin development of supported living apartment complexes with funding through the U.S. Department of Housing and Urban Development. Sites include Birmingham and Florence.
2000	ADRS establishes the Alabama Head and Spinal Cord Injury Registry Service Linkage System (SLS) coordinator position.
2000	A toll free number for the Service Linkage System is obtained.
2000	ADRS CRS is awarded a one-year HRSA MCHB TBI State Grant that includes activities related to development of the AHSCIR Service Linkage System and a plan to evaluate the effectiveness of the AHSCIR SLS.
2000	Alabama Head Injury Task Force establishes a Behavioral Issues Task Force.
2001	CRS commits to fund the four CRS TBI Care Coordinator positions at the conclusion of grant funding.
2001	Protocols are developed for exchange of data between hospitals and ADPH and ADPH and ADRS and to incorporate the AHSCIR into the Statewide Trauma System
2001	ADRS applies for a one year HRSA MCHB TBI State grant for 2001-2002 that focuses on school and transition issues.
2002	MCHB HRSA TBI Post Demonstration Grant identifying students with a TBI that were unidentified or misidentified from the Hoover City or Shelby County school systems utilizing a CD-ROM as a training tool.
2002	TBI Protection & Advocacy Grant funded through Alabama Disabilities Advocacy Program (ADAP) to expand protection and advocacy throughout the state to individuals with a TBI.

- The University of Alabama at Birmingham Traumatic Brain Injury Model System (UAB-TBIMS) is designated by the National Institute on Disability and Rehabilitation Research (NIDRR) as a TBI Model System Center working to maintain and improve a cost-effective, comprehensive service delivery system for people who incur a traumatic brain injury.
- ADRS receives a MCHB HRSA TBI Post Demonstration Grant focused on Psychiatric Disorders and Traumatic Brain Injury. Training materials are developed, workshops and a statewide Conference held in April.
- Dogwood Terrace, a twenty unit Supported Living Apartment Complex for people with Brain Injury and/or other physical disability opens in Florence, Alabama. This facility is the result of collaboration between the Alabama Head Injury Foundation, Accessible Space, Inc., the U.S. Department of Housing and Urban Development, the Alabama Impaired Drivers Trust Fund, the Federal Home Loan Bank of Atlanta, AmSouth Bank, and the City of Florence.
- ADRS and the Alabama Head Injury Foundation use MCHB HRSA grant funds to develop training and systems change activities addressing Traumatic Brain Injury and Domestic Violence.
- 2004 Small Places" social/recreational programs for adults with traumatic Brain Injury expands to include sites in Birmingham, Anniston, Cullman, Florence, Mobile, Jasper, Tuscaloosa, Gadsden, and Huntsville.
- 2005 Construction begins on Patton Ridge, an 18 unit Supported Living Apartment Complex for people with brain injury and/or other physical disabilities located in Hoover, Alabama.
- The Alabama Head Injury Foundation and Accessible Space, Inc. co-sponsor an application for 1.6 million dollars to develop another Supported Living Apartment Complex to be located in Mobile, Alabama. Seed funding is provided by the Alabama Impaired Drivers Trust Fund with local support from the City of Mobile, the Mobile County Commission and the University of South Alabama.
- ADRS and AHIF use three year MCHB HRSA Grant Funding to create access to neurobehavioral health services for Alabamians with TBI and to expand the statewide system of care for persons with co-existing TBI and blindness or visual impairment.
- The University of Alabama at Birmingham Traumatic Brain Injury Model System (UAB-TBIMS) is one of 14 national TBI Model Systems Centers funded by the National Institute on Disability and Rehabilitation Research (NIDRR). UAB has been a TBIMS since 2002, and is currently operating via a 5 year grant (#H133A070039) from 2007 2012 The UAB-TBIMS works to maintain and improve a cost-effective, comprehensive service delivery system for people who incur a traumatic brain injury. A Model System must demonstrate outstanding care to individuals with traumatic brain injury, from the emergency medical services, to acute care in the hospital, to rehabilitation. The UAB TBIMS
 - conducts research.

- distributes their research findings to both clinical and consumer audiences
- collaborates with other clinical research programs and
- participates in the Model Systems Database..
- 2007 Groundbreaking begins on Anderson Fisher Supported Living Apartment in Mobile, Alabama.
- 2007 Alabama Head Injury Foundation conducted Town Hall Meetings across the state, researched other states' service delivery Systems and coordinated the Alabama Head Injury Task Force Behavior Committee activities.
- AHIF spearheaded the Passage of Joint Resolution Act #2007-33 which begins to address the state's need for neurobehavioral treatment and services.
- ADRS and AHIF hosted the First Annual Alabama State of the State Brain Injury Conference in Birmingham, Alabama with over 200 in attendance.
- AHIF develops "Car Seat for Kids" Program in response to Act # 2006-623.
- Eight Staff Members of AHIF become nationally certified as Brain Injury Specialists by the American Academy of Certified Brain Injury Specialists.
- 2008 "Small Places" expands to Baldwin County.
- AHIF reports the findings from the Statewide Town Hall Meetings on "Identified Needs and Services" at Second Annual Alabama State of the State in Brain Injury Conference in Birmingham, Alabama.
- AHIF receives funding from the Alabama Council of Developmental Disabilities to develop a model Neurobehavioral Clinic to be piloted in Birmingham with replication plans statewide, to promote functional independence and health, and support the individual and family through a continuum to follow-up home and community based services.
- ADRS is the recipient of a 4 year HRSA/MCHB TBI Implementation Partnership Grant. Goals will be accomplished through partnership with the Alabama Head Injury Foundation with guidance by the Alabama Head Injury Task Force (AHITF) and committees, and inter-organizational collaboration and coordination among AHITF members and other community partners. Goal 1 is to expand the Statewide System of Care for Children and Youth with TBI that are unidentified and unserved or underserved, with a focus on those in rural communities. Goal 2 is to increase access to neurobehavioral health services for children, youth and adults with TBI. Children and Youth with TBI and at Risk for TBI who are Juvenile Offenders
- 2011 HB 108, the Alabama Sports Concussion Bill, was passed. This applies to all athletic organizations statewide and mandates that:

- Any athletic participant suspected of having a concussion must be held out of further participation until such time that they are evaluated and cleared by a physician.
- All coaches must go through training on recognizing sports related concussions and what their proper roles is (keep the athlete out of participation and refer to a physician).
- They have to provide pertinent information and forms to inform and educate youth athletes and their parents and/or guardians in their program of the nature and risk of concussion and brain injury, including continuing to play after suspected concussion or brain injury.
- HB 308 was passed. This was basically a technical amendment to last year's ACT 2011-541, the Alabama Sports Concussion law. HB-308 clarified two points: first that **all schools** were covered by the legislation; and second, that an athlete suspected of experiencing a concussion could not return to plan or practice **that day**, and not until released by a licensed physician.
- ADRS is the recipient of a 4 year HRSA/MCHB TBI Implementation Partnership Grant. The goal of this grant is to address the four barriers to services identified by HRSA: identification/screening, professional training, information and referral, and resource facilitation, as they impact this target population: youthful offenders with TBI or at risk for having a TBI. This project will build on Alabama's TBI infrastructure to increase the capacity of juvenile justice professionals and staff to assess for impact of TBI and provide targeted and appropriate interventions once the individual is assessed, and link the individual to I & R and resource facilitation
- SB 142 was passed, an amendment to Act #92-586, which changed the name of the Impaired Drivers Trust Fund to the Alabama Head and Spinal Cord Injury Trust Fund. This change is intended to create awareness of who the funds support, and is a first step towards seeking new revenue.
- HB 14 was passed, which assures that the DUI fines be paid to the Trust Fund regardless of whether or not someone who is convicted is sent to a pretrial diversion program. This should begin to increase revenue. Plans are underway to ask for additional revenue in the next legislative session.
- SB 143 was passed, assuring a one-time \$250,000 supplemental appropriation for the TBI programs in FY 2019 supported by the Trust Fund. An additional line-item appropriation was passed to support the Trust Fund programs for \$250,000 starting in FY 2020. ADRS is the recipient of a two year ACL TBI Partnership Implementation Partner Grant award. The grant will: increase state availability and capacity of comprehensive, coordinated behavioral health services for individuals with TBI; empower consumers and families to advocate for culturally competent, person-centered services; and improve program impact across systems by strengthening state infrastructure through streamlined data collection, consumer-driven services and optimized partner collaboration.

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