

# Rough Draft

## ABOUT THE TBI RESOURCES MANUAL

**Purpose:** This manual has been compiled for people who are living with TBI, their families, caregivers and professionals, such as case managers and discharge planners. It has been developed to list, on a county-by-county by county basis, what services are available to help TBI survivors lead satisfying lives within the community. It is hoped that by providing a basic guide to services, we can enhance the quality of life for TBI survivors and their families.

Listed are services providers that have achieved licensure or certification from their accrediting organizations by meeting or exceeding established criteria of compliance for Quality. Federal and state requirements and guidelines are the legal basis for establishment of acceptable Quality Assurance standards incorporated into applicable governing bodies' criteria for licensure and/or certification. The manual is designed as a guide to locating services, and although quality in services is of primary concern, their inclusion in this manual does not guarantee customer satisfaction.

In some areas of the state, there are many providers of the same services. In other parts of the state no known services exist. For other services there is a single provider for qualifying individuals across the state. Each type of service is noted by either stand-alone sections or within each county grid.

Within the State of Arkansas, many disability services have been developed and funded for specific populations. These services may be appropriate for persons with TBI, although originally developed to serve a different population. Many support services are similar in nature and could be adapted for TBI. Services are noted in this TBI Resources Manual as in some instances, services may be paid for either by private pay or through insurance. Examples of this are Medicaid Waiver services designed specifically for people who are older, or who experience developmental disabilities. Through alternate financial arrangements services may be available provided to other groups of people, as well.

The manual is organized by services availability within each county with all Arkansas counties alphabetized. Information may be extracted for a specific county or for all counties in a particular region of the state. Please note that all services are not available in all counties, but may be offered in a nearby county or in Pulaski County, seat of the State Capitol.

## GENERAL INFORMATION ON BRAIN INJURY

Our brains control everything we do, say, feel and think. The brain controls the body's systems that keep us alive, including breathing, blood circulating, food digestion, our hormones, and our immune systems. Damage to this organ can have far reaching implications and impact an individual's life and the lives of those around them. CDC estimates that at least 5.3 million Americans,

## Rough Draft

approximately 2%, of the U.S. population, currently have a long-term or lifelong need for help to perform activities of daily living as result of a TBI.

From CDC, the leading causes of TBI are falls (28%); motor vehicle-traffic crashes (20%), being stricken by and/or against an object (19%), and assaults (11%). Recent CDC data show that, on average, approximately 1.4 million people sustain a TBI each year in the United States. Of that number, approximately 50,000 die, 235,000 are hospitalized and 1.1 million are treated and released from an emergency department.

TBI can cause a wide range of functional changes affecting thinking, sensation, language, and/or emotions. It can also cause epilepsy and increase the risk for Alzheimer's disease, Parkinson's disease, and other brain disorders that become more prevalent with age.

### The Brain After Impact

The skull protects the soft matter of the brain. In an uninjured brain the nerves or neurons are protected from direct contact with blood cells. At the moment of impact, the brain hits the skull and becomes stretched or torn. This allows blood cells and other toxic substances to flow into the spaces that contain the neurons that control our actions. The increased flow of blood causes the brain to swell. Some brain cells die immediately, or at least within the first 24 hours. Other brain cells may continue to die for weeks and months.

Because each brain injury is unique, precise recovery cannot be forecasted. Brain cells that appear to be normal may remain weakened, more vulnerable to stress and may continue to dysfunction throughout life. Other cells may be injured, heal and function properly again. In some cases, scar tissue is formed. Seizure activity may occur. Brain cells are fragile, yet resilient and unpredictable.

Diagnoses of brain trauma can be difficult to make. Even advanced medical diagnosis techniques may not find subtle damage to the brain. However, some medical tests can locate concentrated areas of injury. Two diagnostic tests currently used to measure brain injury are Computerized Tomography (CT) Scans and Magnetic Resonance Imaging (MRI).

A TBI is damage to the brain caused by an external physical force. The result can create a diminished or altered state of consciousness – such as a coma. A TBI can result in physical, psychological, behavioral or emotional impairments and may be temporary or permanent, causing partial or total disability. A TBI does not include degenerative (brain disease) or congenital (hereditary) injuries.

An **acquired brain injury** is not caused by an external force or trauma, but results in many of the same symptoms associated with traumatic brain injury. Major causes of acquired brain injury are strokes, infectious diseases, seizure

# Rough Draft

disorders, substance abuse, and incidents associated with a lack of oxygen to the brain.

A **mild brain injury, or concussion** may occur even if there is no loss of consciousness or noticeable physical injury. Even mild brain injuries can cause temporary or permanent changes in the way a person thinks, feels, acts and interacts with others. According to CDC, approximately 75% of TBIs that occur each year are concussions or other forms of mild TBI.

Many people who sustain a brain injury experience challenges for the rest of their lives. Unlike a broken bone that heals and has an anticipated recovery time, brain injury isn't so predictable. Damage to the brain cells can be temporary or permanent. Recovery may take weeks, months or years. Some individuals never regain the functions they had before their injury.

## Symptoms

According to CDC, the signs and symptoms can be subtle. Symptoms of a TBI may not appear until days or weeks following the injury. The symptoms may not even be recognized, as people may look fine even though they may act or feel differently. The consequences of TBI may include, but are not limited to:

### Cognitive Symptoms

- Short or long-term memory loss
- Trouble concentrating or paying attention for periods of time
- Reading and writing challenges
- Organizational problems
- Inability to do more than one thing at a time
- Slowed ability to process information
- Difficulty conversations/communication difficulties
- Difficulty in judging distance and space
- Impaired judgment

### Physical Symptoms

- Seizures
- Sleep difficulties
- Sensory loss – smell, touch, taste
- Slow or slurred speech
- Lack of balance
- Fatigue, increased need for rest
- Vision impairments
- Loss of hearing or ringing in the ears
- Headaches or migraines
- Difficulty speaking/understanding language
- Decreased Motor skills
- Sexual dysfunction
- Increased or decreased muscle control
- Partial or total paralysis

### Emotional and Behavioral Symptoms

- Depression, grief, or chemical changes
- Anxiety, restlessness, agitation
- Lower stress tolerance
- Behavior changes
- Inappropriate behaviors
- Irritability, frustration, impatience
- Mood swings
- Impulsiveness and lack of judgment

## Rough Draft

- Emotional flatness and acting passive
- Uncontrolled anger
- Impaired self-perception

Children with a brain injury can have the same symptoms as adults, but it is often harder for them to let others know how they feel. Call your child's doctor if they have had a blow to the head and you notice any of these symptoms: tiredness or listlessness; irritability or crankiness (will not stop crying or cannot be consoled); changes in eating (will not eat or nurse); changes in sleep patterns; changes in the way the child plays; changes in performance at school; lack of interest in favorite toys or activities; loss of new skills, such as toilet training; loss of balance or unsteady walking; or vomiting.

## SPECIALTY SERVICES PROVIDERS

Throughout the state there are several disability-related private and non-profit organizations. These organizations offer services such as advocacy, systems advocacy, life skills training and peer support groups.

### Arkansas Disability Law Center

The DISABILITY RIGHTS CENTER (DRC) is a private non-profit agency with offices in Little Rock, Arkansas. Since 1977 the Governor of Arkansas has designated DRC the independent rights protection and advocacy system for persons with disabilities in Arkansas. DRC operates under authority outlined in Federal law and is funded primarily by the Federal government.

PROTECTION AND ADVOCACY SYSTEMS (P&As) like DRC are established in every state and U.S. territory. DRC carries out activities under several federal programs to provide a range of services to advocate for and protect the rights of persons with disabilities throughout the state.

The DRC priorities focus on Housing, Juvenile Justice, Abuse and Neglect, Education, Voter Access, Americans with Disabilities Act access, and Public Policy.

DRC makes a wide range of [advocacy-related services](#) available to our clients at no charge.

### DRC Grievance Procedure

If you have a grievance with the services you receive from Disability Rights Center you have the right to resolve your complaint utilizing the [grievance procedure](#).