

CHAPTER 9**(SCR 17)**

A CONCURRENT RESOLUTION reestablishing a task force on services and supports for individuals with acquired brain injuries.

WHEREAS, it is estimated that each year thousands of Kentuckians suffer from acquired brain injuries; and

WHEREAS, the physical, emotional, vocational, and rehabilitative needs of individuals with acquired brain injuries are complex and may involve a combination of issues and services, such as health care, employment, substance abuse, mental health, physical and sexual abuse, criminal behavior, emotional disabilities, developmental and learning disabilities, and behavior disorders; and

WHEREAS, preliminary information from a prevalence survey funded by the Traumatic Brain Injury Trust Fund indicates that approximately twenty percent (20%) of random Kentucky households surveyed had one or more household members who had sustained a brain injury; and

WHEREAS, individuals with acquired brain injuries and their families can be productive members of the community but may need life-long supports and services to do so, and existing services are limited and unavailable in many areas of the state, and do not provide life-long supports and services; and

WHEREAS, in this Commonwealth there are no intensive, inpatient services for adults with acquired brain injuries who are in need of specialized crisis stabilization, evaluation, and treatment, and the lack of services and supports, including treatment for behavior disorders, may result in the arrest and incarceration of individuals with acquired brain injuries; and

WHEREAS, at the end of January, 2003, there were over 400 more requests for assistance than could be funded by the Traumatic Brain Injury Trust Fund, and there were 152 people on the waiting list for the Acquired Brain Injury Medicaid waiver program; and

WHEREAS, the legislative task force on acquired brain injuries, created by 2001 House Concurrent Resolution 67, found that more time and work was necessary to provide a thorough review of programs, services, and supports for individuals with brain injuries and the task force strongly recommended continuation of their efforts; and

WHEREAS, the provision of the appropriate level of care, treatment, and services in a fiscally responsible manner is in the best interests of the individuals with acquired brain injuries, their families, their employers, their communities and the Commonwealth at large;

NOW, THEREFORE,

Be it resolved by the Senate of the General Assembly of the Commonwealth of Kentucky, the House of Representatives concurring therein:

Section 1. There shall be created a Task Force on Services and Supports for Individuals with Acquired Brain Injuries. The task force shall be charged to make recommendations regarding:

(1) Mechanisms to make an accurate estimate of the number of adults and children with acquired brain injuries that receive publicly funded services;

(2) Changes to existing administrative regulations governing existing publicly funded programs that would increase access to services and supports for individuals with acquired brain injuries;

(3) The elimination of barriers to the access to and provision of services, including but not limited to a centralized information and referral source and increasing the number of professionals skilled in the area of brain injury;

(4) Strategies to develop intensive inpatient services that provide crisis stabilization, specialized evaluation, and treatment for adults with acquired brain injuries;

(5) Strategies to increase the effectiveness of services to individuals with acquired brain injuries receiving public services outside of the existing brain injury programs;

(6) Strategies for the decriminalization of individuals with acquired brain injuries; and

(7) Strategies to increase the employment of vocational training and educational services to individuals with acquired brain injuries.

Section 2. The members of the task force shall include:

(1) One (1) member of the Senate, appointed by the President of the Senate;

(2) One (1) member of the House of Representatives, appointed by the Speaker of the House;

(3) One (1) individual with acquired brain injury and one (1) family member of an individual with acquired brain injury appointed by the Legislative Research Commission from a list of six (6) names submitted by the Brain Injury Association of Kentucky;

(4) The chairperson of the Traumatic Brain Injury Trust Fund Board or designee;

(5) The executive director of the Brain Injury Association of Kentucky or designee;

(6) The Commissioner of the Department of Vocational Rehabilitation or designee;

(7) The Secretary of the Justice Cabinet or designee;

(8) The Commissioner of the Department of Education or designee;

(9) The executive director of the Kentucky Jailers Association or designee;

(10) The Commissioner of the Department for Medicaid Services or designee;

(11) The Commissioner of the Department for Mental Health and Mental Retardation Services who shall also designate one (1) representative from the Division of Substance Abuse, one (1) representative from the Division of Mental Retardation and Developmental Disabilities, and two (2) representatives from the Division of Mental Health, one (1) of whom shall represent the Brain Injury Services Unit to be appointed by the Legislative Research Commission;

(12) One (1) representative of a community mental health center appointed by the Legislative Research Commission from a list of three (3) names submitted by the Kentucky Association of Regional Mental Health/Mental Retardation Programs;

(13) One (1) case manager with experience in the provision of community-based services to individuals receiving services through the Acquired Brain Injury Medicaid waiver program, designated by the secretary of the Cabinet for Health Services and appointed by the Legislative Research Commission;

(14) One (1) administrator of the Benefits Management Program of the Traumatic Brain Injury Trust Fund designated by the chairperson of the Traumatic Brain Injury Trust Fund and appointed by the Legislative Research Commission;

(15) One (1) neuropsychologist appointed by the Legislative Research Commission from a list of three (3) names of individuals with at least three (3) years of experience working with individuals with acquired brain injuries submitted by the Kentucky Psychological Association; and

(16) One (1) rehabilitation specialist appointed by the Legislative Research Commission from a list of three (3) names of individuals with at least three (3) years of experience working in a hospital that provides rehabilitation services to individuals with acquired brain injuries submitted by the Kentucky Hospital Association.

Section 3. The task force shall conduct its first meeting no later than July 15, 2003, and shall make a final report of its findings and specific legislative recommendations to the Legislative Research Commission and the Governor no later than January 15, 2004.

Section 4. Provisions of this resolution to the contrary notwithstanding, the Legislative Research Commission shall have the authority to alternately assign the issues identified herein to an interim joint committee or subcommittee thereof, and to designate a study completion date.

Approved March 7, 2003