



**State of New Hampshire
Brain & Spinal Cord Injury
Advisory Council**

C/o Brain Injury Association of New Hampshire
52 Pleasant Street
Concord, NH 03301



2021 ANNUAL REPORT

The Brain and Spinal Cord Injury Advisory Council (The “Advisory Council”) is charged by the New Hampshire Legislature with investigating the unmet needs of New Hampshire residents with brain or spinal cord injuries. See NHRSA 137-K. The Advisory Council has been holding public hearings for twenty-three years, since its establishment by statute in 1997.

Due to the 2021 COVID-19 quarantine, the first public hearing was held through a ZOOM virtual platform on May 18, 2021. The second public hearing scheduled for the fall was replaced with an Advisory Council Survey on Unmet Needs for Individuals with Spinal Cord Injuries. The surveys were placed on the Brain Injury Association of New Hampshire and the Granite State Independent Living Website. Results from the testimony at the virtual public hearing and spinal cord survey indicated that significant unmet needs continue to persist in the State.

Lack of Medical and General Public Education and Awareness.

Persons living with brain injury (survivor) report that there can be misunderstanding by employers and even by primary care health professionals, particularly when the individual has no obvious visible disability. Access to resources is more complicated because many people do not understand how brain injuries affect survivors, families and caregivers.

Survivor Statement: “There is a need to educate law enforcement on effects of brain injury. One of the ways to do this is through brain injury survivor cards that will call attention to the officer that an individual has a brain injury.”

Community Programs/Brain Injury Clubhouse. Post rehabilitation programs, such as the program at the Krempels Center, are not available to survivors who do not live in the Portsmouth area. There is unanimity among survivors regarding the benefits of the Krempels Center. Some survivors travel from as far away as Keene to participate. Transportation issues are significant. There should be more programs like those offered by the Krempels Center.

The council and members of the brain injury community have started a conversation with the Bureau of Developmental Services relative to the feasibility of a startup of a second clubhouse in New Hampshire.

Home Support for Individuals with Disabilities and Family Members. Survivors and family members face significant obstacles when they are discharged from acute care. They are frequently unable to negotiate through multiple systems, which is not intuitive, even when services are available. Pertinent information should be more available at discharge. Resource directories and assistance in obtaining services are important.

Family Member Statement: “I am concerned about the “gap” in support for survivor and family members transitioning home from hospitals while waiting on services in the home.”

Survivor Statement: “I feel that there are two types of services; those that receive a lot of support/services/advocacy, and those who do not.”

Employment. Survivors describe the loss of employment and lack of supports needed to return to work, misunderstanding about their abilities and deficits, and difficulty finding employers receptive to their disabilities.

Transportation. There is a lack of public transportation for a population that is frequently unable to drive. Survivors describe numerous impacts including difficulties getting to medical appointments, difficulty accomplishing basic life responsibilities, and isolation from activities in the community.

Unmet needs for individuals with spinal cord injuries listed on the survey included:

- **long wait time for wheelchairs**
- **lack of mental health services**
- **affordable physical therapy**
- **lack of transportation**
- **ADA compliant accessible buildings**
- **wheelchair accessible recreation**
- **home modifications**
- **difficulty in finding caregivers.**

Emerging Issues. Damage from the consequences of the COVID-19 coronavirus often intensify the cognitive, physical, emotional and behavioral symptoms associated with a traumatic brain injury.

Increase of co-occurrences of individuals with traumatic brain injury and substance abuse and opioid overdoses. The Substance Use Disorder (SUD)/Brain Injury and Mental Health interagency task force was established in 2019 by the Brain Injury Association of NH, for the purpose of raising awareness and changing behaviors around the issue of SUD and Brain Injury. When opioid overdose patients experience a lack of oxygen to the brain for 30 seconds or more, there is an increased chance they will sustain a brain injury – and if a brain injury is identified early, the patient has a better chance of recovery by receiving the proper treatment and resources. The task force includes a cross-section of professionals, including representatives from the NH Bureau of Developmental Services, the NH Dept. of Education/Office of Student Health & Wellness, the Brain Injury Association of NH and the NH DHHS Bureau of Drug & Alcohol Services. The task force is co-chaired by Robin Schell and Phil Girard.

The task force meets quarterly, and the focus is on three key audiences:

1. Providers, first responders, substance use counselors and anyone on the medical front lines
2. Family and caregivers of an opioid overdose patient
3. Teens and Educators

St. Joseph Hospital Launches Pilot Program To Identify & Serve Patients with Brain Injury. St. Joseph Hospital, in partnership with the Brain Injury Association of NH, launched its pilot program on identifying brain injury in patients with Substance Use Disorder (SUD) on December 2nd, with a training session led by Dr. Deepak Vatti, MD, Chief of Emergency Medicine.

The half-hour session focused on educating providers, non-providers, case managers and social workers about the process for identifying patients with a brain injury, using the screening tool developed by subject matter expert Dr. John Corrigan, Director of the Ohio Valley Center for Brain Injury Prevention and Rehabilitation. The training also reviewed the process St. Joseph Hospital care providers will go through to refer patients with brain injury to the Brain Injury Association of NH for additional help and resources.

Senate Bill 439. The council with the help of council member Senator Bob Giuda filed SB 439, AN ACT relative to the BSCIAC and community based programs. This bill streamlines the council membership, removes the barriers, makes the council more productive and ensure quorums.

If you have any questions about this report, feel free to contact Advisory Council Coordinator Ellen Edgerly at 603-834-9570. Prior reports are available on the New Hampshire Brain Injury Website at <http://www.bianh.org/bsciac.html>.

Respectfully submitted,

James C. Piet, MS

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Brain and Spinal Cord Injury Advisory Council
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