#### To: Department of Rehabilitation

From: TBI Advisory Board Public Policy and Funding Committee

Date: Oct 16, 2023

Re: Urgent TBI Program Funding Request

With information gathered by the Public Policy and Funding Committee, the TBI Advisory Board recommends that the Department of Rehabilitation (DoR) requests funding from the state to address an urgent funding need for the TBI Program and works with the state legislature to address issues with the funding model.

**Background**

In 2021/22, the DOR was able to provide funding for 6 TBI Sites to provide a set of 5 core services to TBI survivors at a total cost of $1,150,000.

| Annual Funding per TBI Site | $175,000 |
| --- | --- |
| Number of TBI Sites in the State | 6 |
| DoR Admin and Oversight | $100,000 |
| Total | **$1,150,000** |

In 2022/23 the DoR continued the base funding mentioned above and also took advantage of a one-time funding opportunity to use $5,000,000 in HCBS funds to expand the capacity and development of programs that support TBI Survivors throughout the state. This was a targeted development of a Program that has been proven to be effective in supporting TBI Survivors to live their fullest lives in the community with specific supports that are not available in other programs. There was a specific effort to both expand access to services for people in rural areas through virtual programming and directly helping survivors to bridge the Digital Divide. At the direction of DoR there has also been targeted outreach to unserved or underserved areas and identified at-risk populations within our state including the homeless and people who have sustained a TBI as the result of interpersonal violence.

This $5 million investment has enabled the DoR and its partners to add an additional 6 TBI Sites to its program, and has added funding to the original 6 Sites which has allowed them to expand their services in capacity and in targeted outreach.

**Don’t let this one time investment go to waste.**

The expense of starting new TBI Programs and expanding existing TBI Programs is important to the long term goal of the TBI Advisory Board State Plan which includes development of *statewide* services. The DoR and the TBI Programs themselves have made an investment in funds, time and training to develop these programs and enroll more TBI survivors. It is critical at this point to continue to support these programs so that they do not disappear. As the TBI program sites can attest, the largest expense in program development is the startup costs that cover program development, purchasing, hiring, staff training, recruitment of participants, etc. We have added 6 TBI Sites that have now accomplished these tasks. At this point we should at least maintain these programs.

**See Attached Table** for funding history and recommendation

**Request**

DoR should make a budget request to maintain service provision of 12 TBI Sites that provide much needed services to TBI survivors and caregivers. The timeliness of this request is urgent as 6 TBI Sites will lose all TBI funding after June 30, 2024 if no action is taken. The request should cover continued funding to 12 TBI Sites at $500,000 per year plus 5% per year for DoR oversight and support for a total of $6,300,000 annually.

| Annual Funding per TBI Site | $500,000 |
| --- | --- |
| Number of TBI Sites in the State | 12 |
| DoR Admin and Oversight (5%) | $300,000 |
| Total | **$6,300,000** |

In addition to the funding increase, the Public Policy and Funding Committee along with the TBI Advisory Board strongly recommend changing the funding model away from a Grant that is re-competed every 3-5 years. This model has led to poor program continuity and a turnover of TBI Site providers and increased cost needed for new site program startup.

We recommend that the Welfare and Institutions Code be changed to reflect a funding model to ensure a more effective process of program improvement and expansion. Implementing renewable TBI Site Contracts with Department oversight, program reviews, and certification will yield a service provision model that will more successfully serve consumers. This model will encourage TBI service providers to work collaboratively to implement best practices and sharing of information to more effectively serve TBI survivors and caregivers. A certification process will also allow the Department to implement TBI service provider reviews, program requirements, program continuity across sites, and feedback on program improvement.

Thank you for your consideration,

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Kristie Warren

Public Policy and Funding Committee Chair

CA TBI Advisory Board