



## **PUBLIC POLICY BRIEF #1**

*Resource Facilitation...building a success story!*

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*The  
Challenge  
is GREAT  
but the  
Future is  
BRIGHT*

Resource Facilitation (RF) is a highly structured employment service for people with acquired brain injuries offered by the Rehabilitation Hospital of Indiana (RHI). Started through a federal grant in 2009 as a partnership between RHI and Indiana Vocational Rehabilitation (VR), RF has improved return to work for the VR population from 18% in 2009 to 70% today. People who return to work through RF: repay the full cost of their care in state income taxes, experience measurably reduced levels of disability, and require fewer services going forward. RF has dramatically changed the future for people with acquired brain injuries, their families, their friends, their employers, and their communities.

### *Employment*

In 2009, 18% of those with acquired brain injuries seeking employment through Indiana VR returned to work. RF started with two grants from the Health Resource Services Administration (HRSA). Since the first grant started in 2009, the RF return to work rate has never been lower than 64%, and is currently 70%.

To put this in context, recent data from the US Department of Labor indicates that of the 253,854,000 people in the workforce in August 2016, 30,253,000 of them were people with disabilities<sup>1</sup>. That is a 12% participation rate. Clearly, a program with a 70% success rate is significantly exceeding the national employment average for people with disabilities.

### *Wages and Taxes*

In 2011, at RHI's request, the Ball State University Center for Business and Economic Research conducted a study of the economic impact resulting from people with brain injuries returning to work. Their conclusion was that if everyone in Indiana with an acquired brain injury resulting in long term disability received RF services, and the success rate remained at the 64% reported in 2011, the annual economic impact in earned wages would be \$31,017,775.<sup>2</sup> With a state income tax rate of 3.4% that would translate to \$1,054,604 – annually. As the Ball State study broke down average wages by gender and education level, and as we have the gender, education level, number of days since re-employment, and average hours per week of employment since completion of RF, we were able to calculate far more specific economic impact outcomes.

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As of September 2, 2016, 86 people have returned to work after completing Resource Facilitation. These people have:

- Earned \$1,719,358 in wages,
- Paid Indiana income taxes in the amount of \$584,581, which have:
  - Exceeded the full cost of their care (\$567,600) by \$19,961, and
  - Assuming a state match rate of 22% exceeded the \$122,872 state match for RF services by \$461,706.

While RF pays for itself, it has other positive effects.

**Service Avoided**

Through the use of two nationally recognized instruments, we know that RF routinely reduces a person’s level of disability<sup>3</sup>, and reduced the actual number of services provided, and the services believed to be necessary<sup>4</sup>.

**The Mayo-Portland Adaptability Inventory (MPAI-4)** measures the level of disability experienced by a

person with a brain injury. The MPAI-4 is administered at the outset and conclusion of RF services. The chart to the right reports the reduction in level of disability resulting from RF services.

Likewise, the **Survey of Unmet Needs (SUNSU)** measures

service levels, and the perception of needed services. On average, people starting RF received 6.65 services, by completion they were receiving 5 services. Further, their unmet needs (services they believe they needed) were reduced from 8.63 at the outset to 3.02 by completion.

While we haven’t yet calculated the actual dollars saved by Hoosier taxpayers as a result of RF services, it is fair to say that RF results in increased wages, increased state tax revenues, reduced service expenditures, and a reduction in the perception of the need for services.

**How can we do better?**

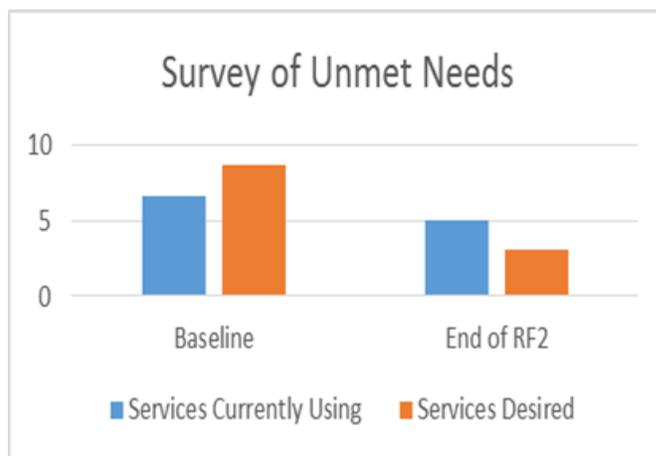
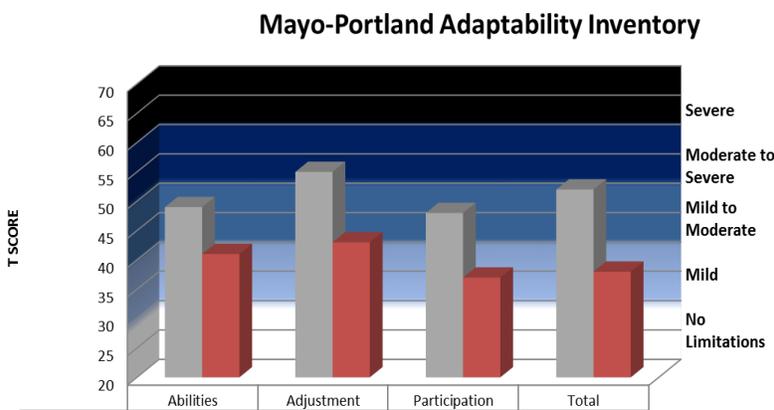
*The need by the numbers in Indiana -*

We have just barely scratched the surface. The Ball State economic analysis referenced above estimates that 6,181 Hoosiers annually have a brain injury that will result in long term disability<sup>5</sup>. With all of the work we have done, our average time post injury for people entering RF remains over 10 years. Today, 86 people have returned to work through RF, and there are almost 400 people active in RF services. Sadly, there are thousands of Hoosiers with brain injuries who would benefit from services.

*The state of brain injury knowledge and treatment in Indiana*

Much of our knowledge remains anecdotal as brain injury is frequently not diagnosed, misdiagnosed as mental illness, or diagnosed but not treated as a serious chronic lifelong challenge. We find that many people have been told that their brain injury would not, or could not, affect them long term.

Others have experienced brain injuries that have never been diagnosed. Some people with brain injuries have been misdiagnosed as having a mental illness, others have a brain injury and a mental illness. One prominent practical



consequence of brain injury is that many people have addiction and self-control problems resulting from their brain injury. Unfortunately, we have found many of these people in the criminal justice system.

Now the good news, we have also frequently discovered that many professionals who grasp the severity of a brain injury don't appreciate the degree to which the consequences of that injury can be mitigated by education and training, a situation that can be reversed with training.

### **Capacity Building -**

To serve people with acquired brain injuries more effectively across the state, RHI is actively engaged in capacity building as a part of our Resource Facilitation program. This includes:

- Building capacity by making new relationships with medical professionals and not for profit community services organizations,
- Providing training whenever possible, including teaching professionals and many not for profit services agencies how to screen their clients for brain injury,
- Our newly established Research and Training Center is launching a statewide training initiative. This October, we are offering two day brain injury training seminars in North, Central and Southern Indiana. It is our intention to make this an annual event.
- Working with Marion County Problem Solving Courts. This effort is so significant that it is addressed in some greater detail below.
- Currently screening all participants in Marion County's Problem Solving Courts.

### **Criminal Justice –**

It is well established that brain injury is a risk factor for involvement in the criminal justice system. To address this problem:

- It is our intention to use these findings as the basis for a more comprehensive study of the relationship between brain injury and criminality.
- As we come to understand the scope and nature of this correlation, we will create solutions based on the principles learned in Resource Facilitation.

Indiana has come a long way in the community focused treatment of brain injury since 2009. We have learned that we have a long way to go. This seemingly daunting task holds great potential for the future. Building on what we have learned in the past 7 years, we are convinced that we can positively affect countless Hoosiers, their families, and their communities.

#### End Notes:

<sup>1</sup> <http://www.bls.gov/news.release/pdf/empsit.pdf>

<sup>2</sup> Reid, I, McGeary, KA, Hicks, MJ, (2011) Potential Economic Impact of Resource Facilitation for Post-Traumatic Brain Injury Workforce Re-Assimilation, Center for Business and Economic Research, Ball State University

<sup>3</sup> Malec, J., & Lezak, M. D. (2003). The Mayo-Portland Adaptability Inventory (MPAI-4).

<sup>4</sup> Heinemann, A. W., Sokol, K., Garvin, L., & Bode, R. K. (2002). Measuring unmet needs and services among persons with traumatic brain injury. *Archives of Physical Medicine and Rehabilitation*, 83(8), 1052-1059.

<sup>5</sup> Reid, I, McGeary, KA, Hicks, MJ, (2011) Potential Economic Impact of Resource Facilitation for Post-Traumatic Brain Injury Workforce Re-Assimilation, Center for Business and Economic Research, Ball State University.

