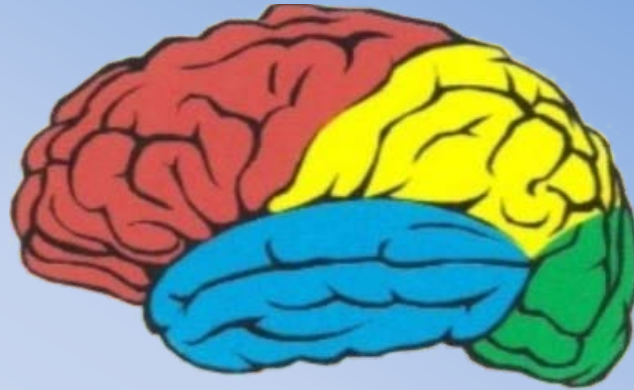


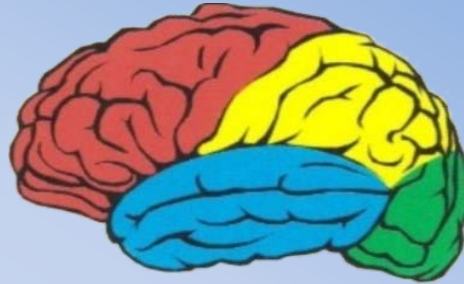
BrainSTEPS



Child & Adolescent Brain Injury School Re-Entry Program

Brenda Eagan Brown, M.S.Ed., CBIS
Program Coordinator
eaganbrown@biapa.org

BrainSTEPS



- Strategies
- Teaching
- Educators
- Parents
- Students

Traumatic Brain Injury Statistics



CDC Statistics

Average **ANNUAL** number of Traumatic Brain Injury
Emergency Department Visits and Hospitalizations in
the United States

474,000

Children with Traumatic Brain Injury 0-14 years of age

- Most children who sustained a TBI (91.5%) were treated and released from the emergency department.

- **1 in 90** children under 5 and
- **1 in 125** from 0 to 14 have had a traumatic brain injury
- **1 in 150** children are diagnosed with an autism spectrum disorder.

How Common is TBI in Children in Pennsylvania?

Each year, approximately

26,000

children in Pennsylvania sustain a
traumatic brain injury
(mild, moderate, or severe)

Source: The Brain Injury Association of Pennsylvania, 2008

In 2006

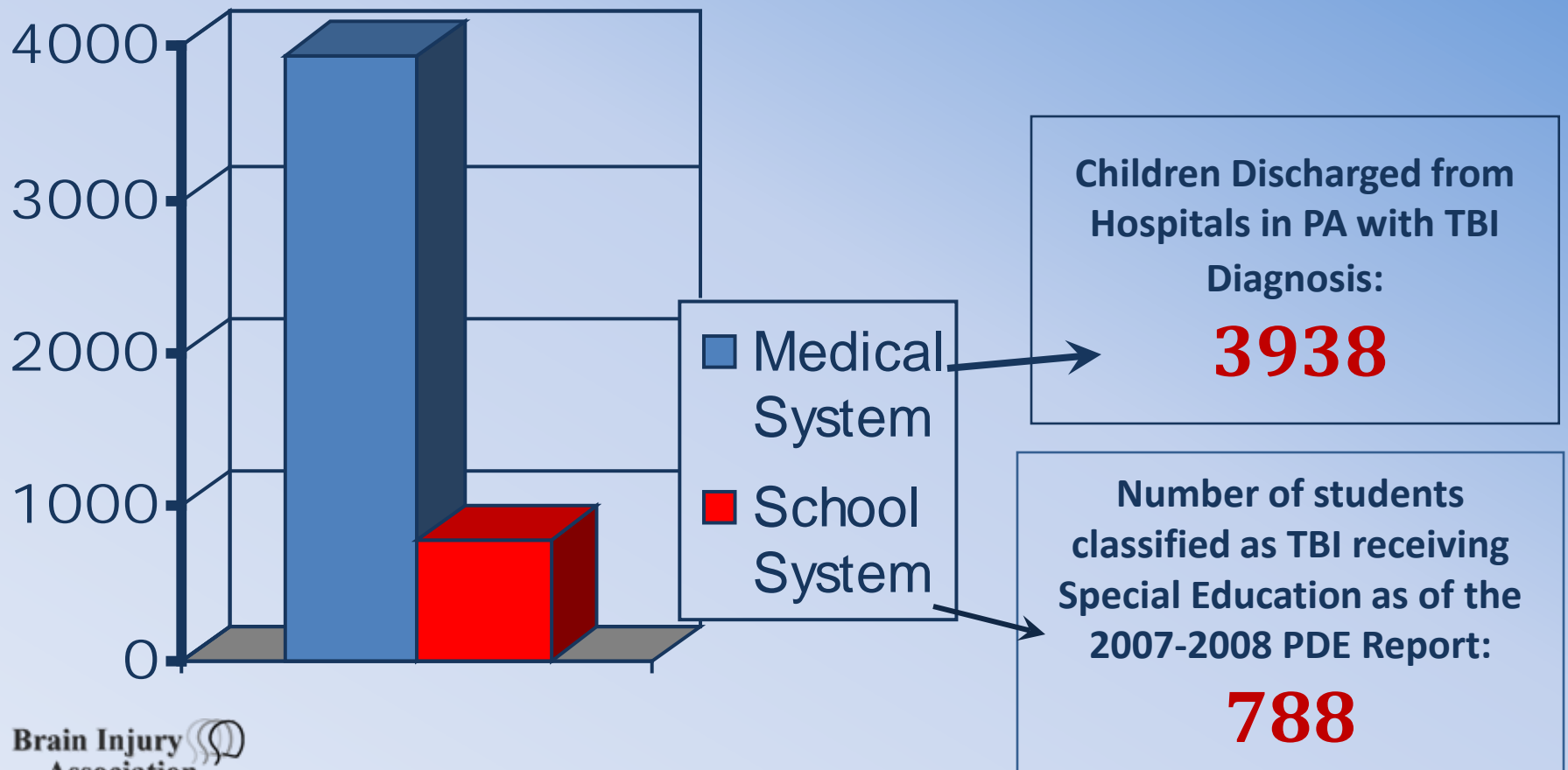
3,938

Children & Adolescents in
Pennsylvania were
HOSPITALIZED with **TBI**

Source: The Pennsylvania Department of Health, 2006
DOES NOT INCLUDE EMERGENCY ROOM VISITS.

Statistics in Pennsylvania

In one year (2006) the PA Department of Health recorded **3938** children ages 0-21, who were hospitalized with TBI.



Where Have All the Children with TBI Gone?



Why the Discrepancy?



- Not all children who sustain a brain injury experience lasting effects
- Not all parents want to have their child classified – they want their child back to “normal”
- The effects of a brain injury can be latent.

Why the Discrepancy?

- Effects of TBI may mimic other disabilities leading to misdiagnosis and inappropriate placement
- Under-identification & misidentification within the educational system.



School Administrator

“Usually we just label brain injured kids as Emotionally Disturbed... because, you know, they usually are.”

Educator's Knowledge of Brain Injury

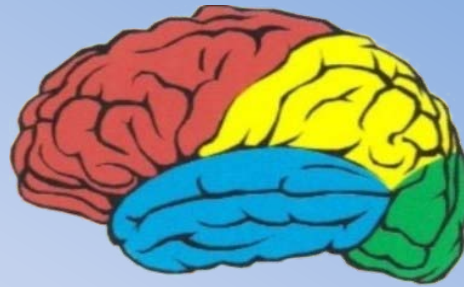
- Lack of Pre-service Training on brain injury
- Less than 8% of graduate level special education training programs cover brain injury
- Limited knowledge of the impact of TBI



- ➡ She doesn't look brain injured!
- ➡ He's using his brain injury as an excuse to get out of doing school work!
- ➡ The brain injury should be healed by now!
- ➡ But there was no loss of consciousness!



BrainSTEPS



Brain Injury School Re-Entry Model Program

The BrainSTEPS Program

- Funded by a Title V, federal Maternal Child Health Block Grant, from the PA Department of Health.
- Partnered with the PA Department of Education, Bureau of Special Education
- Implemented by the Brain Injury Association of Pennsylvania - September 2007

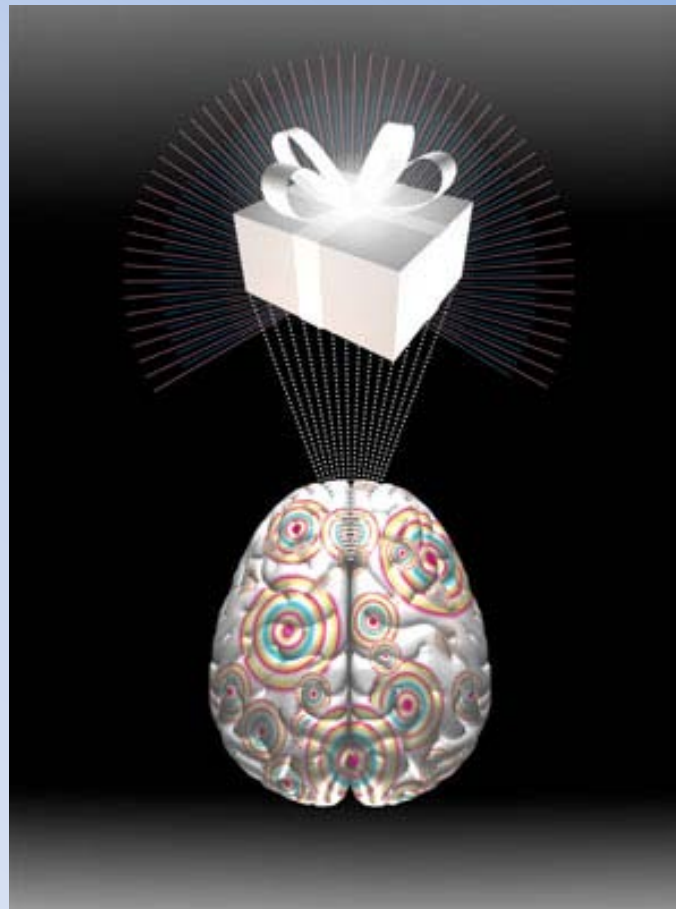
What is BrainSTEPS?

- Brain injury consulting teams available to families and schools throughout Pennsylvania.
- Teams are extensively trained in the educational needs of students returning to school following brain injury.
- Teams will work with local school staff to develop educational programs, academic interventions, strategy implementation, and monitoring of students.

- Team members provide training and consultation regarding Brain Injury:
 - identification
 - school re-entry planning
 - IEP development
 - intervention selection & implementation
 - long-term monitoring



Pennsylvania's BrainSTEPS Program is Considered a National Model for Brain Injury School Re-Entry!



December 2008,
BrainSTEPS won the
*Award of Excellence for
Programs & Services*
from the national
Brain Injury Association of America!

Maternal and Child Health Bureau, Health Resources & Services Administration

Ready, Set, Go: Including Children and Youth in TBI
Programs

PA's BrainSTEPS Brain Injury School Re-Entry Program

Tuesday, June 17, 2008

[http://www.mchcom.com/archivedWeb
castDetailNewInterface.asp?aeid=456](http://www.mchcom.com/archivedWebcastDetailNewInterface.asp?aeid=456)

Team Membership

- Schools
- Educational Intermediate Units
- Medical Rehabilitation Centers
- Community Agencies/Institutions
- Families

BrainSTEPS Encompasses Acquired Brain Injuries

- **Traumatic Brain Injuries –**
an injury to the brain caused by an external process

- **Non-Traumatic Brain Injuries –**
an injury to the brain caused by an internal process

Acquired Brain Injuries only occur AFTER the birth process.

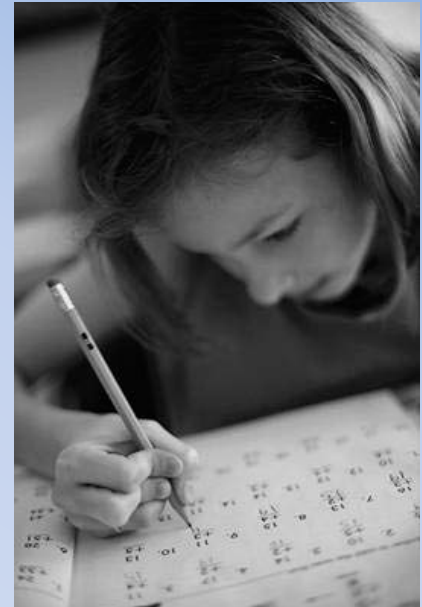
BrainSTEPS Objectives

1. Increase awareness of children and youth with brain injury who are served by the school system
2. Provide training and technical assistance to schools, families & rehabilitation providers in early identification of children with brain injury.



BrainSTEPS Objectives

3. Partner with PA brain injury hospitals & rehabilitation providers to promote effective communication & consistent contacts between providers and educators to facilitate successful transition
4. Ensure that brain injured students re-entering school & those previously identified receive appropriate educations
5. Explore & direct families to community resources

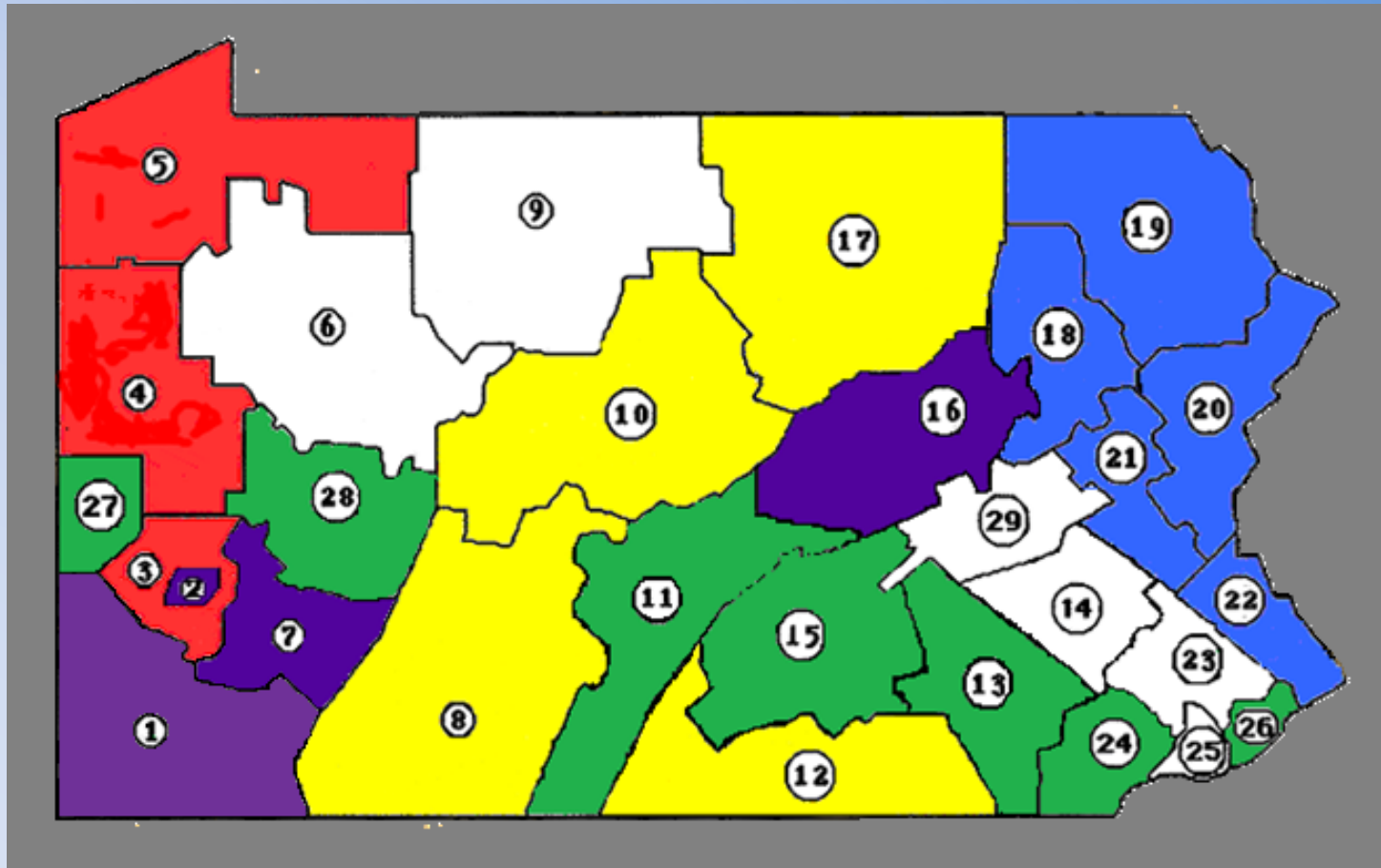


BrainSTEPS Objectives



6. Participate in the student's Regular or Special Education planning process.
7. Offer consistent ongoing consultation with teachers regarding educational program & strategies.
8. Train educational professionals on brain injury effects when a student in their school has been identified

21 Active BrainSTEPS Teams



Red, Yellow, Blue, Green = Trained & functioning

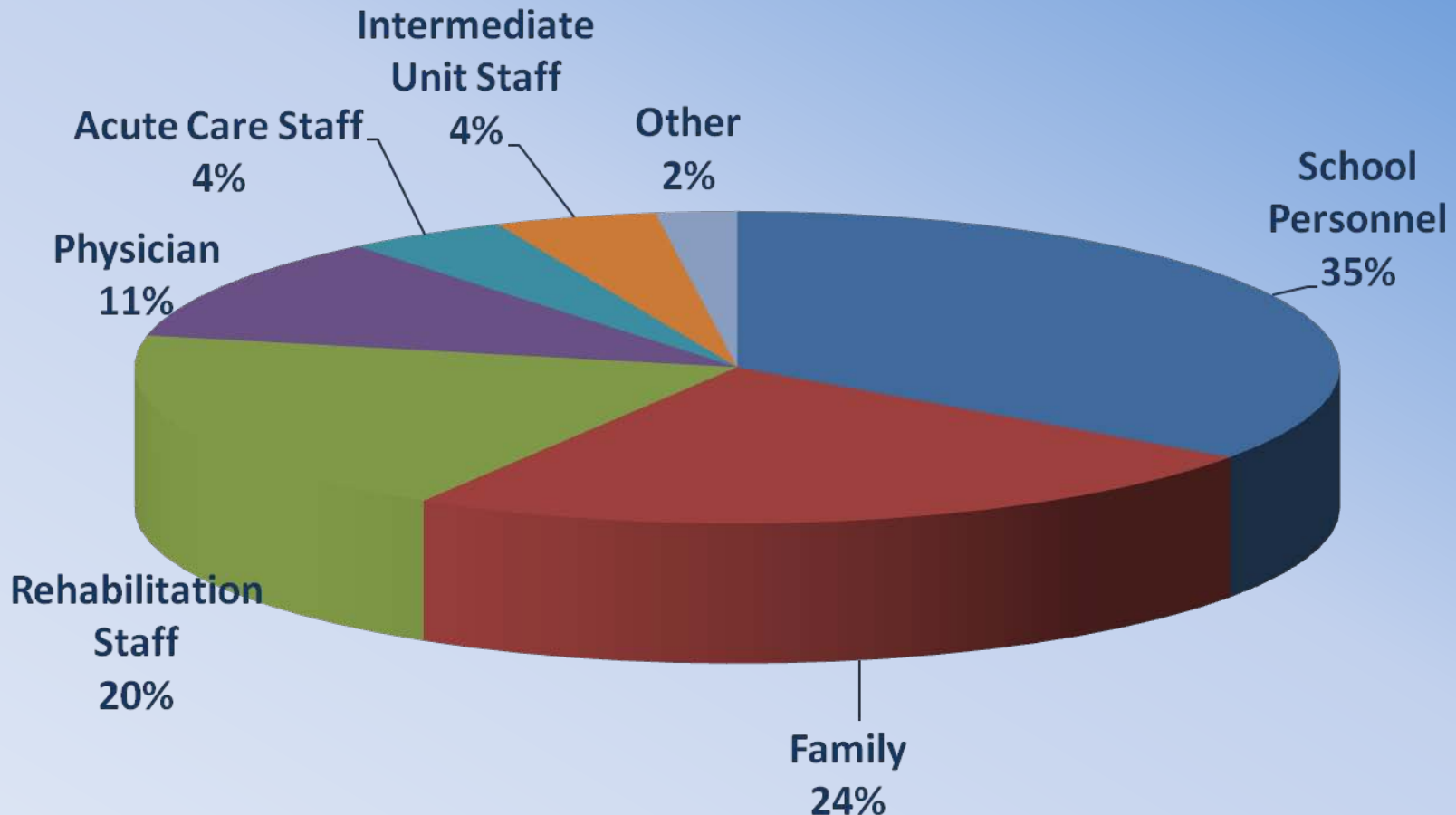
Purple = Teams training during Fall 2009

BrainSTEPS Team Members (2008-2009 School Year):

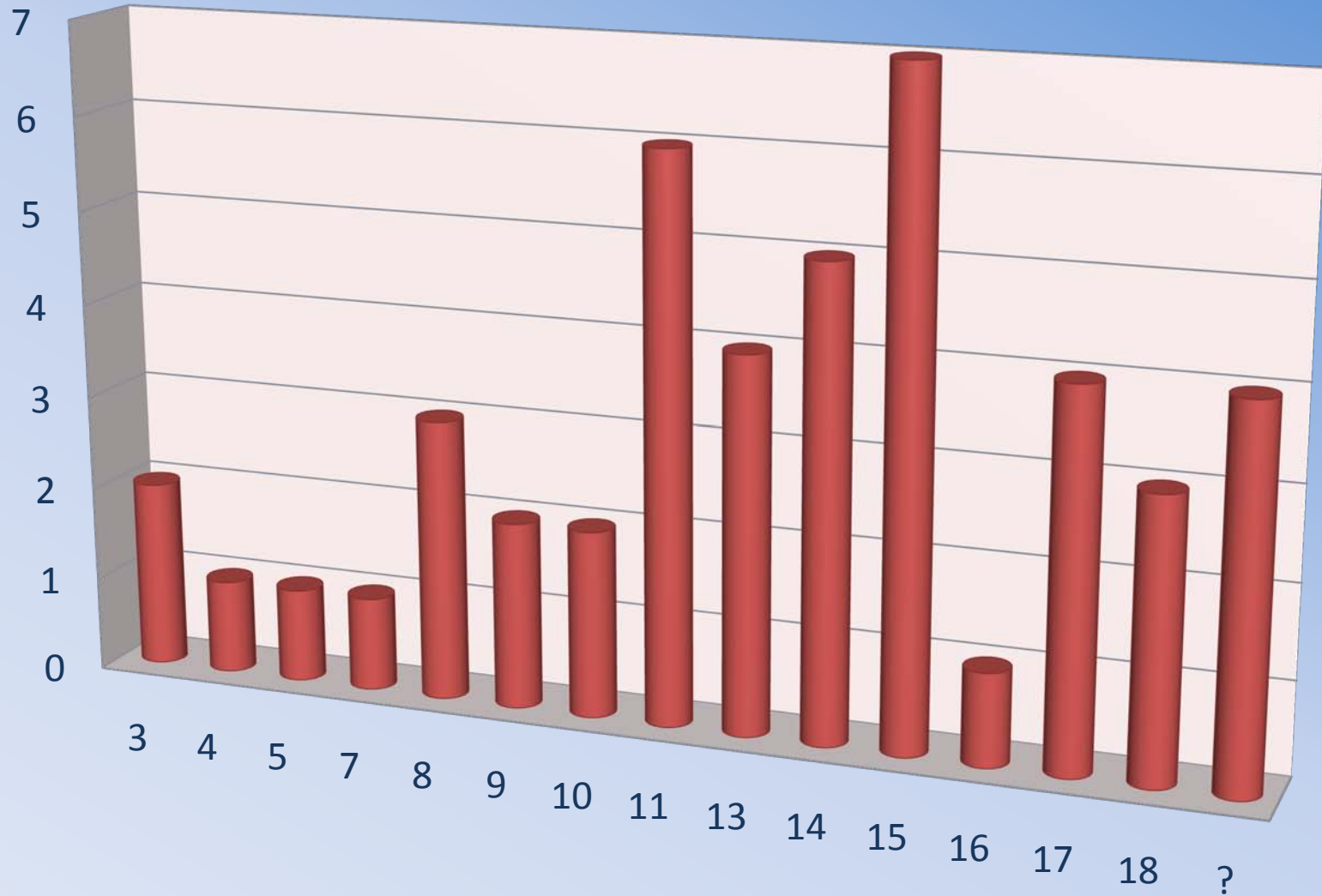
191

BrainSTEPS Student Data January 2009 – March 2009

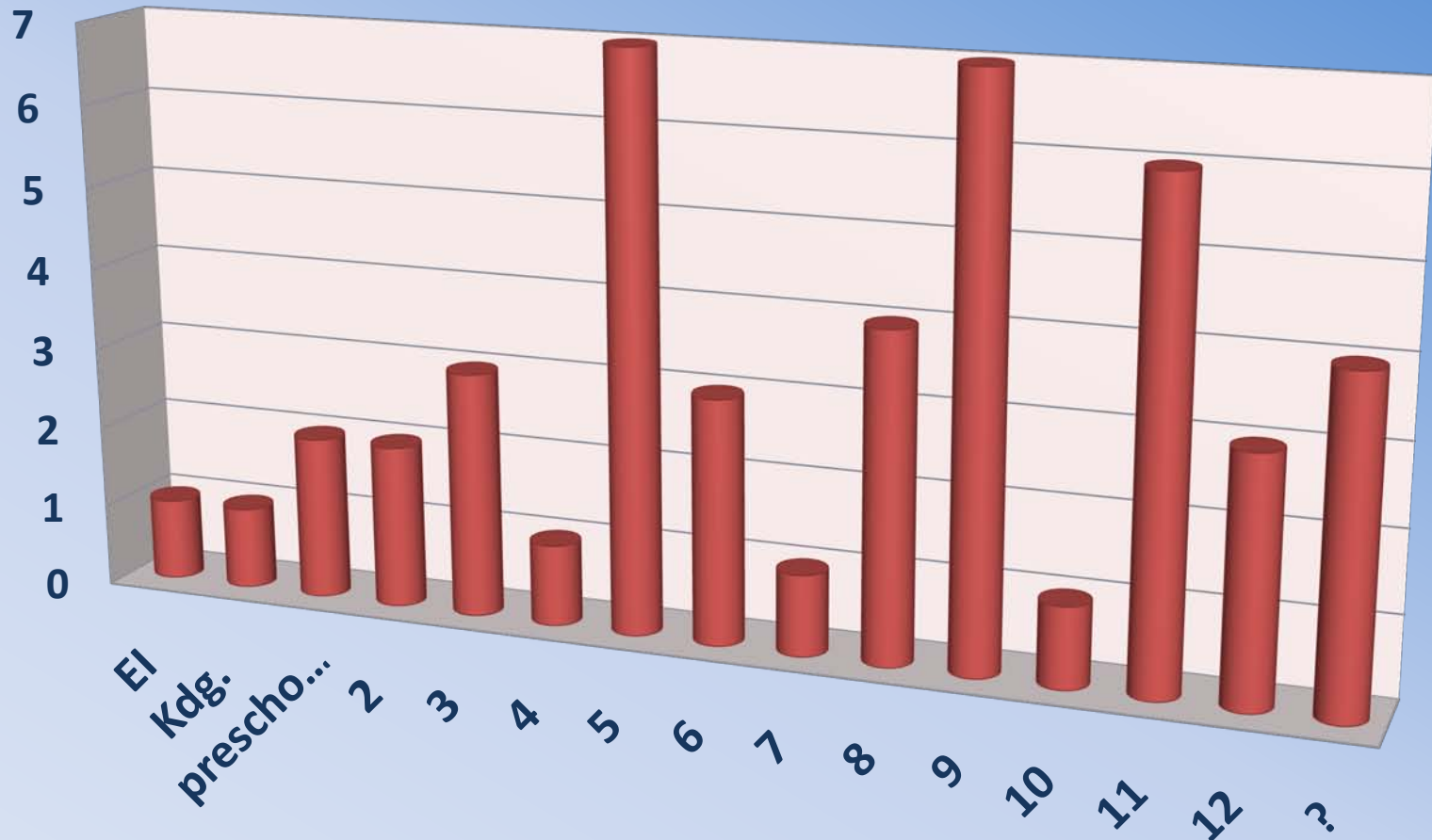
Referrals Came From:



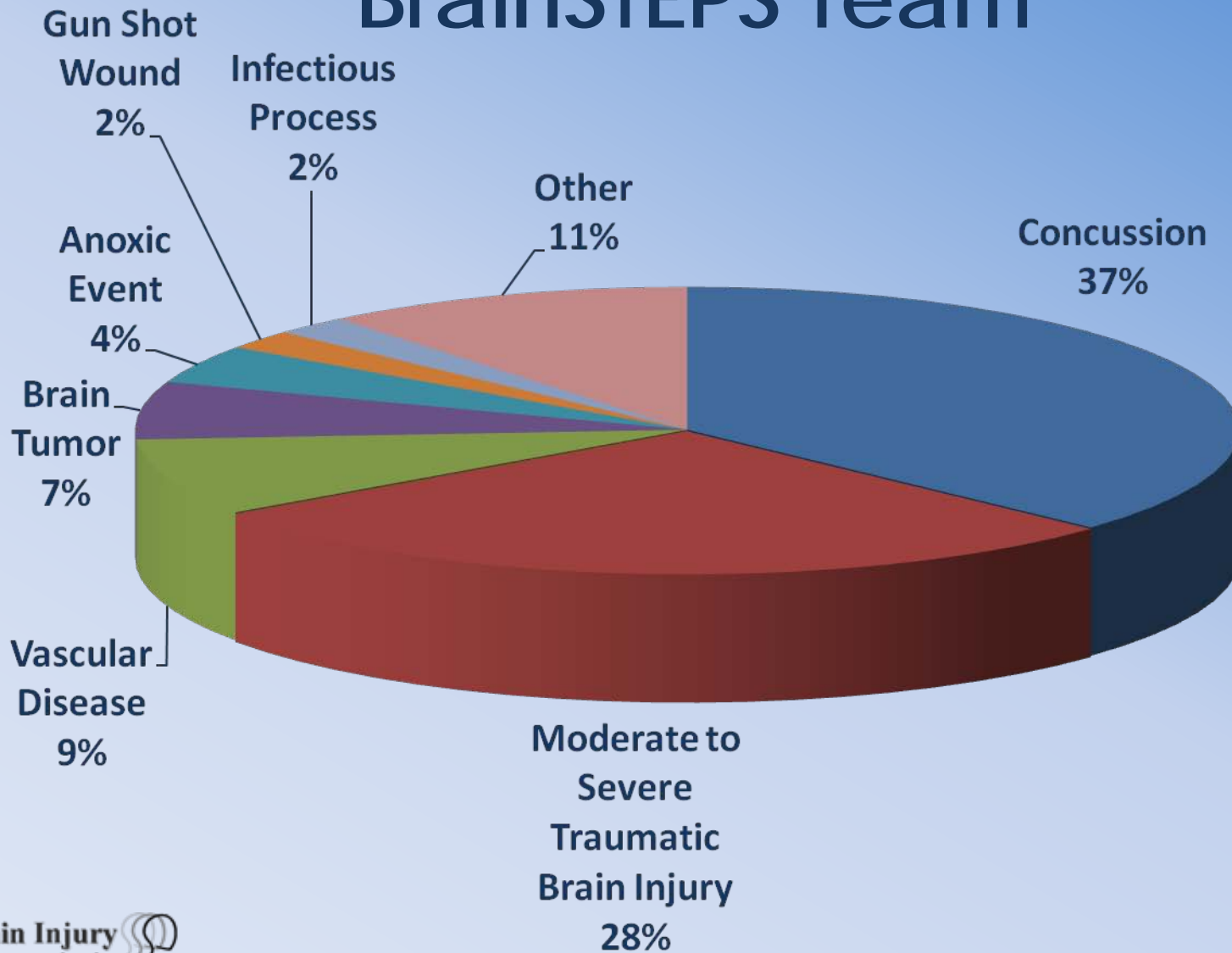
Age of Students Served by BrainSTEPS: January-March 2009



Grades of Students Served by BrainSTEPS: January - March 2009

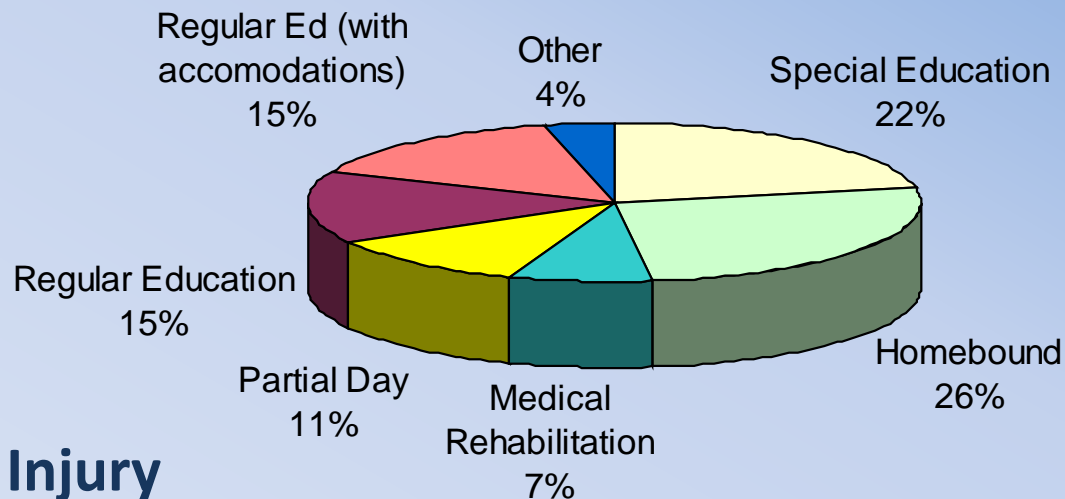
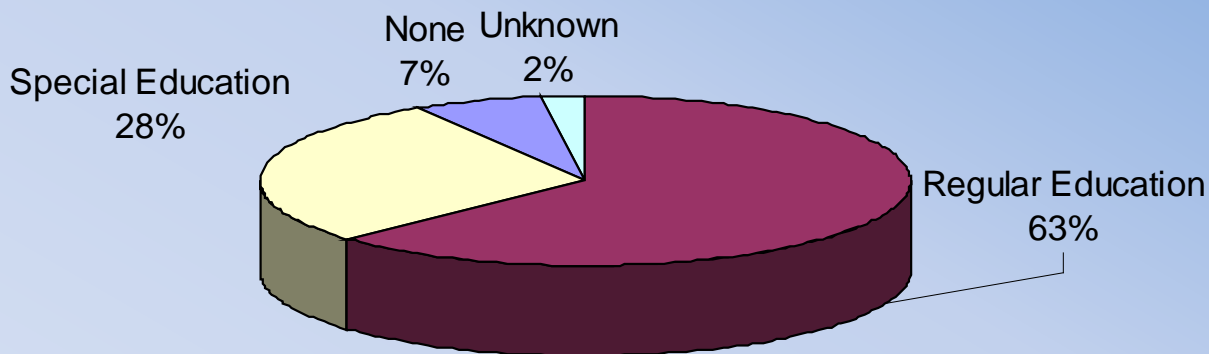


Diagnosis of Students Served by the BrainSTEPS Team



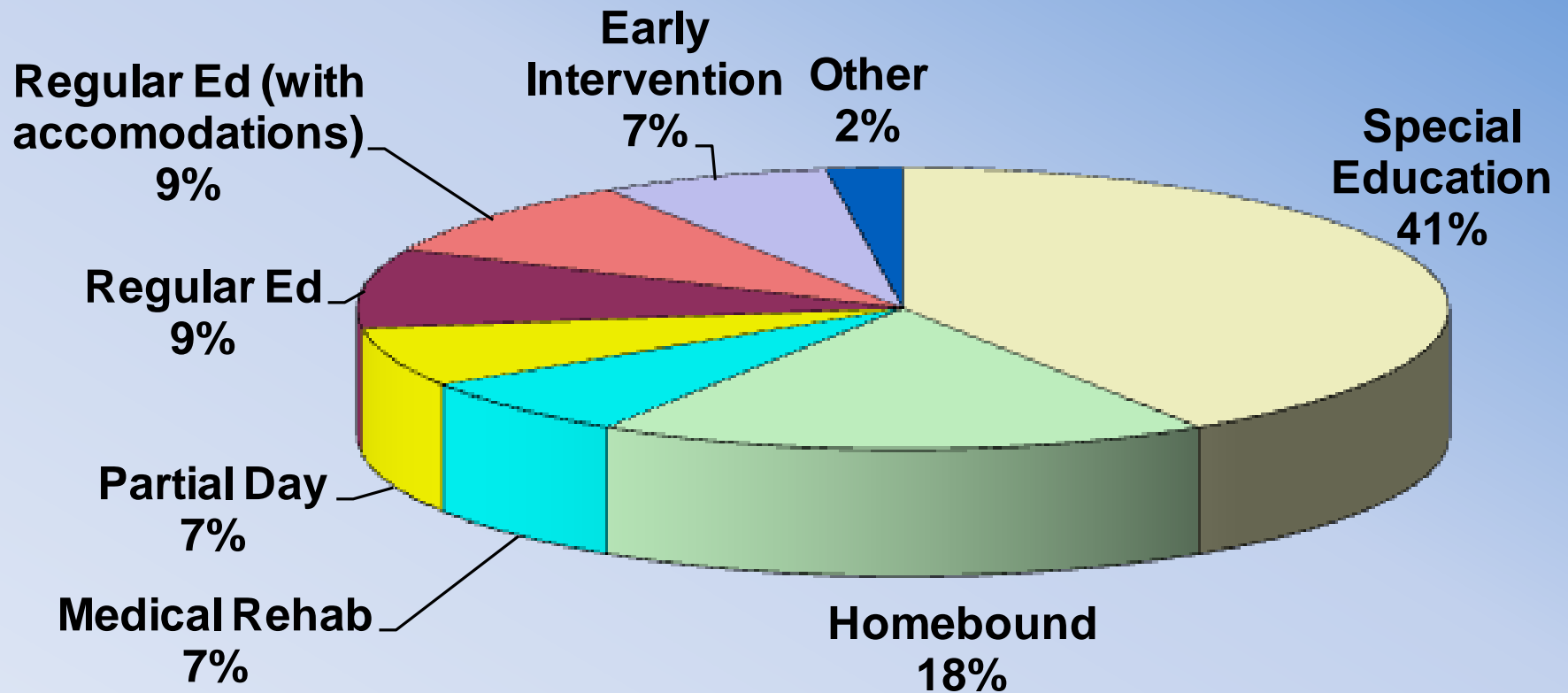
Educational Placements of Students

Prior to Brain Injury



Post Brain Injury

Students enrolled in regular education *prior* to brain injury were enrolled in the following educational placements *post* brain injury and involvement with the BrainSTEPS team.



Number of Hours BrainSTEPS Teams have Spent Serving Students

This quarter:

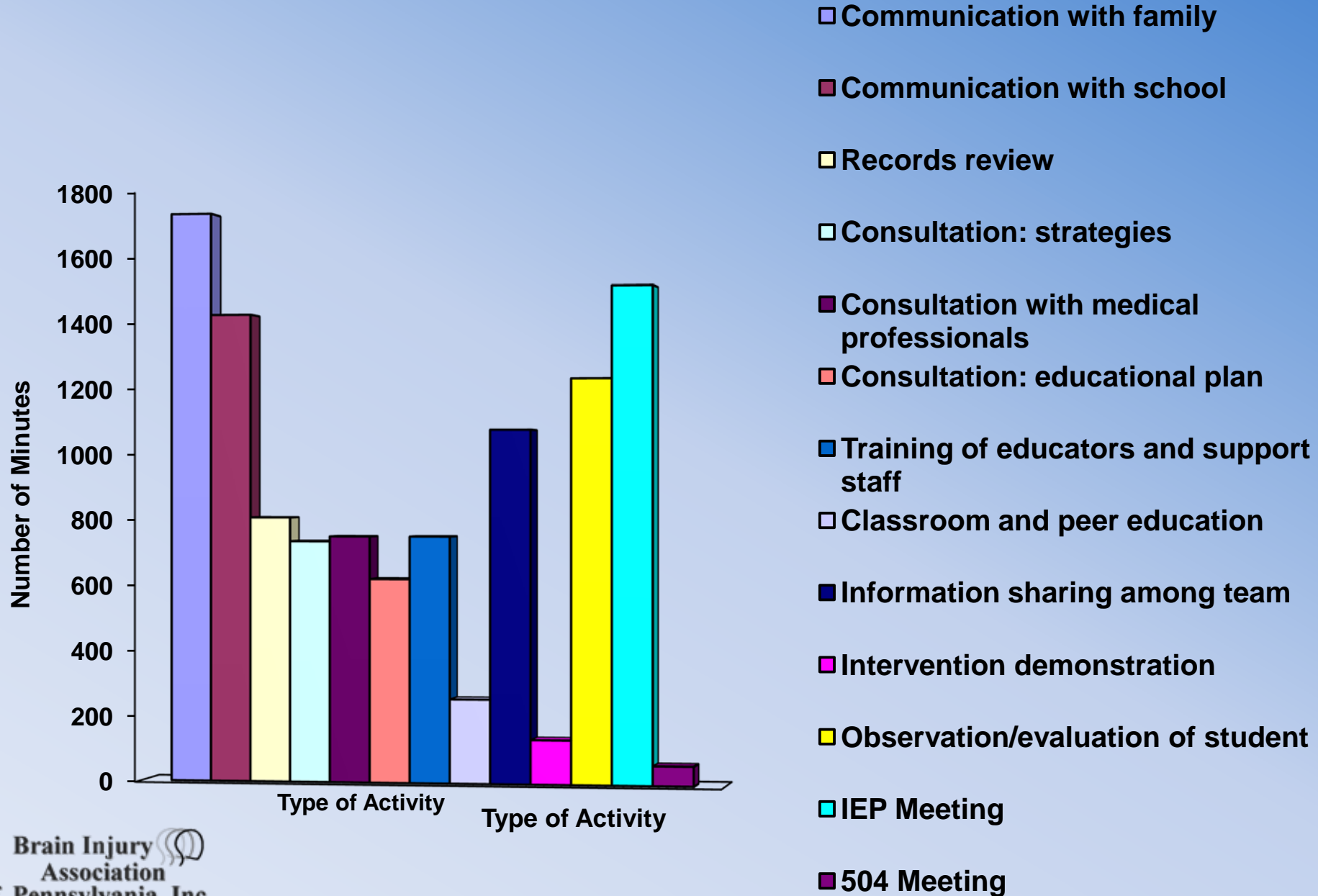
4 hours per student

Last quarter:

2.7 hours per student

- Communication with family
- Communication with school
- **Records review**
- Consultation: strategies
- Consultation with medical professionals
- Consultation educational plan
- **Training of educators and support staff**
- Classroom and peer education
- Information sharing among team
- **Demonstration of interventions**
- **Observations/evaluations of student**
- **Participation in IEP development**
- Participation in 504 Service meetings

Time Spent on BrainSTEPS Team Activities



BrainSTEPS:

- ORBS – Online Reporting BrainSTEPS

http://apps.leadervservices.com/_orbs/app/index.html

Development of Satisfaction Survey

- Survey questions were designed to assess level of satisfaction in multiple domains:
- Parent/student Survey:
 - Increased knowledge of brain injury
 - Quality of school experience
- School Staff Survey:
 - Quality of BrainSTEPS team involvement
 - Training and resources available to school personnel

Program Coordinator Activities

- Individual student specific consultation with teams
- Facilitates continued team infrastructure building
- Regularly scheduled contact with Team Leaders
- Team Trainings

PA Department of Education Conference 2009

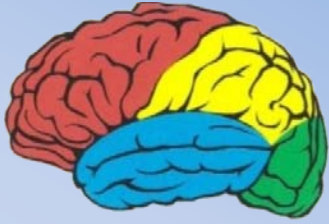
Three hour presentation:

- Brain Injury Educational Effects
- BrainSTEPS Program

http://pdeconference.com/presentations/Brenda_Eagan_Brown.html

What Can You Do?

1. Ensure that EVERY child diagnosed with a BRAIN INJURY is referred to the BrainSTEPS Team in your region.
2. If you are in an IU region without a BrainSTEPS team, help us partner to form one.



For More Information on the BrainSTEPS Program

Contact:

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