

Montana's Resource Facilitation Service
Support and education for people living with a brain injury and their families

The Resource Facilitation Service is free public health service for people who have just received traumatic brain injuries, as well as for more than 10,000 Montanans already living with traumatic brain injury. It provides information and support to help people cope with brain injury. This service does not replace any medical rehabilitation or follow-up that may be necessary after an injury, and it does not provide case management. RFS supports survivors and their families solve the puzzle of living with brain injury

How it works

If a brain injury survivor decides to participate in the service, a resource facilitator will call within two weeks after discharge from the hospital, and then again at six, 12, 18 and 24 months. The resource facilitator helps answer questions, troubleshoot problems, connect people with community resources, and educate family members, employers and educators about what it means to live with brain injury.

The person with the brain injury (or the parent, if the survivor is a child) can opt out of the program at any time, or they can extend the program after two years if there is an ongoing need for service.

Anyone living with a brain injury, or a family member who is assisting, can also enroll in the resource facilitation service by calling 800-241-6442, or 541-6442 in Missoula.

After every contact, the resource facilitator follows up with a written letter and additional information. Additional follow-up calls are scheduled as necessary to support the efforts of the survivor or family member to solve a problem.

The Resource Facilitation Service also regularly visits hospitals to educate them about the importance of giving patients the opportunity to sign a release so that they can be enrolled in the RFS and provides hospitals with information to share with patients before discharge.

Why it is important

Without RFS, survivors and family may spend months without the information they need to make decisions and seek services. The lost time can have devastating effects on recovery, family dynamics, and family finances. RFS is the only resource of its kind in Montana, and it is available free of charge for everyone who needs it, for as long as they need it.

The Resource Facilitation Project in Minnesota, upon which Montana's RFS is based, documented these results for resource facilitation:

- A rate of return to work at twice the national average;
- An increased likelihood that children receive appropriate educational supports;
- Increased family support and understanding and decreased family crisis;
- Reduced long-term dependence on public assistance;
- A reduced risk of institutionalization.

The challenge today

Montana's Resource Facilitation Service has just finished its pilot year. RFS is currently provided by one half-time resource facilitator. With 251 RFS enrollees, 64 of them Native Americans, she is already carrying more than a half-time caseload, and her caseload is growing by an average 10 enrollees per month. Approximately seven out of ten referrals are from hospitals.

The facilitator is supported by a part-time financial officer, a work-study student and volunteers. The program has no administrative staff at this time. Because there is no staff to continue developing relationships with hospitals and encourage referrals to the RFS, only St. Vincent Hospital is participating consistently at this time.

RFS was identified as a critical need for Montana five years ago, in a study conducted by the Department of Public Health and Human Services. The Montana Brain Injury Association and the Montana Department of Public Health and Human Services collaborated to obtain grants to develop the resource facilitation service. RFS is operated by the Montana Brain Injury Association in its Missoula office.

On September 1st, 2006, the federal start-up grant ended and was replaced by a much smaller implementation grant. Today, the half-time resource facilitation service is funded with that grant, with financial support from the Montana Advocacy Program and with charitable contributions. The Association is engaged in a membership drive, and is planning two fundraisers and the 2007 Montana Brain Injury Conference.

The current implementation grant will end on March 31st, 2007. An application for one more year has not yet been approved. If approved, the grant will fund one half time resource facilitator. If the pending grant application is denied, the Brain Injury Association Board of Directors believes that it can sustain the RFS at its current level only through June.

Even if the federal implementation grant is approved, however, the Brain Injury Association believes that RFS is unsustainable at the current staffing level. The RFS caseload will require a full-time facilitator by spring 2007, and an additional full-time facilitator within the following year. In addition, RFS needs administrative staff in order to develop and sustain hospital participation, coordinate with tribal governments, support the growing network of brain injury support groups, and do program development.

In every state that has a resource facilitation service, the service is funded by a state appropriation, whether general fund or special revenue. **The Brain Injury Association of Montana believes that this critical public health service deserves to be a fully-staffed and state-funded service in Montana.**