



Brain & Spinal Injury
Trust Fund Commission

MISSION POSSIBLE
Annual Report 2003

ANNUAL REPORT 2003 CONTENTS

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FELLOW GEORGIANS,



I am honored to present the 2003 annual report of the Brain and Spinal Injury Trust Fund Commission – a series of highlights and accomplishments over the past year.

This was an exciting year as it marked the first year of distribution of the Trust Fund. To fulfill its goal to support independence, inclusion in the community, consumer choice and self-determination, the Commission disbursed funds that supported a variety of needs of people with traumatic brain and spinal cord injuries. "Specifically, the Trust Fund was used to support transportation expenses at 24% of total distributions, housing r elated expenses (housing and home modifications) at 21%, assistive technology at 17%, and medical treatment or therapy at 16%. More importantly, hundreds of individuals were assisted in ways that allowed for a better quality of life and independence through the efficient use of these funds.

The Commission, a group of volunteer men and women, have given many hours and gifts of talent in developing structure and operating policies for the Trust Fund. The Commission, now with effective and highly talented staff, is transitioning into a

governing body that will focus on long-term strategic planning initiatives, fiscal oversight, compliance to mission, effective management and evaluation of defined service goals. It is fulfilling and worthy.

I invite you to learn more about the important work of the Brain and Spinal Injury Trust Fund Commission and see how so many people who triumph over these catastrophic events are assisted with an immediate need or with a dream to live more independently.

Sincerely,

A handwritten signature in blue ink that reads "D. B. Skelley". The signature is fluid and cursive, with a large loop at the end of the last name.

Dennis B. Skelley, PT, MSA, FACHE

Chair

VISION ♦ MISSION ♦ HISTORY

VISION

A Georgia where people with traumatic brain and spinal cord injuries are valued, have equal opportunity and real choices.

MISSION

The Brain and Spinal Injury Trust Fund Commission improves the quality of life of Georgians with traumatic brain and spinal cord injuries by distributing funds and resources, and making policy recommendations to enhance statewide infrastructure.

HISTORY

In 1998, the Georgia General Assembly, with the support of a number of individuals and grassroots organizations, passed legislation creating the Brain and Spinal Injury Trust Fund Commission. The legislation provides for an additional penalty of 10% of a fine imposed in any case in any court in which individuals are convicted of driving under the influence of alcohol or drugs. Those sums are assessed and collected by the courts and paid into the Brain and Spinal Injury Trust Fund, which is administered by the Commission and distributed to individuals with traumatic brain and spinal cord injuries to assist them in paying for their care and rehabilitative needs. A constitutional amendment authorizing the creation of the Trust Fund was overwhelmingly ratified by Georgia voters in a referendum during the November, 1998 general election.

COMMISSION

As part of the 1998 legislation, the General Assembly created the Commission to develop criteria for and oversee the disbursement of funds from the Trust Fund.

The Commission is made up of fifteen members appointed by the Governor and five state agencies, and includes:

- ♦ At least seven individuals with traumatic brain or spinal cord injuries, or their family members;
- ♦ Representatives of the medical and rehabilitation communities; and
- ♦ One representative each from the Department of Community Health, the Department of Education, the Department of Human Resources, the Department of Labor, and the Department of Public Safety.

GOAL

The Brain and Spinal Injury Trust Fund is designed to support independence, inclusion in the community, consumer choice, and self-determination for Georgians with traumatic brain and spinal cord injuries.

The Commission is committed to fulfilling this goal by:

- ♦ Collecting and distributing funds and resources for various needs;
- ♦ Maintaining a database of qualified service providers;
- ♦ Evaluating the needs of Georgians with traumatic injuries;
- ♦ Collaborating with like-minded organizations; and
- ♦ Creating and supporting public policy initiatives that enhance statewide infrastructure.

MISSION POSSIBLE



According to our mission statement, the Commission improves the lives of Georgians with traumatic brain and spinal cord injuries in two ways: through the distribution of funds and resources, and through the development of policy recommendations to enhance statewide infrastructure.

In its first year of full-time operation, the Commission has begun to do just that. The Commission worked diligently to create a process of distributing Trust Fund dollars that emphasizes and supports independence and self-determination for people with traumatic injuries. It traveled to nine cities across the state to meet with individuals, caregivers, advocates, and service providers to gather input into the most effective use of the Trust Fund. And, most importantly, it began the process of awarding and distributing funds to individuals to assist them in achieving independence and self-determination. Altogether, the Commission awarded a total of \$810,655.00 for services and goods in FY03. These services and goods ranged from transportation to housing modifications to rehabilitation services to recreation. Almost immediately, we saw and heard about the dramatic impact these funds made in each recipient's ability to live independently.

We learned a great deal in this first year of distribution. We identified ways to streamline the application process and make it more responsive to the needs of individuals with traumatic injuries. For instance, rather than scheduling specific dates for application periods and deadlines, we have now, in FY04, begun to accept applications on an ongoing basis, and have cut our review and approval process down to just six to eight weeks for complete applications.

In addition, we were reminded that we do not exist in a vacuum, and that, no matter how diligently we work to distribute the Trust Fund effectively, the success of our

efforts depends largely on the effectiveness of the larger state system of services for people with traumatic injuries. As we have seen, the state does not currently have accurate data on the number of traumatic brain and spinal cord injuries in the state, which prevents us from being able to do long-range planning for the distribution of funds, and which prevents individuals with traumatic injuries from learning about critical resources immediately post-injury. In addition, it is clear that there is a lack of coordination and communication among all state agencies that provide services to people with traumatic injuries, which makes it difficult for the Commission to maximize Trust Fund dollars and assist individuals in accessing available resources.

To address this, the Commission is beginning to fulfill the second component of our mission in a couple of ways. First, we are making legislative recommendations for the enhancement of the Central Registry, which should result in more accurate data collection on traumatic injuries in Georgia, and provide information on resources to individuals immediately post-injury. Second, the Commission has agreed to serve as the Lead Agency on Traumatic Injuries for the state of Georgia, evaluating the needs of individuals and the current system of service delivery, and making recommendations for the enhancement of service coordination among all state agencies.

Clearly, the next year will prove to be as exciting as the first. There is still much to be done to enhance our efforts to be good and effective stewards of the Trust Fund. As we have seen from our mission statement, the process of enhancing the quality of life for people with traumatic injuries is both about management and distribution of resources as well as an evaluation of the larger system. Our strategic plan emphasizes both of these elements. Clearly, the Commission has an exciting opportunity to promote lasting change for all Georgians in the coming years.

Kristen E. Vincent, *Executive Director*

DISTRIBUTING THE BRAIN AND SPINAL INJURY TRUST FUND - THE PROCESS

ELIGIBILITY:

To be eligible for the Trust Fund, an individual must:

- ◆ Be a resident of the state of Georgia
- ◆ Have sustained a traumatic brain or spinal cord injury
- ◆ Have exhausted all other resources

APPLICATION, REVIEW and DISTRIBUTION PROCESS:

- ◆ Individual with traumatic injury or someone acting on their behalf completes and submits an Application for Distribution.
- ◆ Commission office receives and processes application, before forwarding the application to the Commission's Distribution Committee.
- ◆ Distribution Committee reviews every application before meeting to discuss and make recommendations for awards.
- ◆ Distribution Committee presents recommendations for awards to the Commission, which votes to approve the Committee's recommendations.
- ◆ Commission forwards their final recommendations to the Office of the Governor for final approval.
- ◆ Governor issues final approval of awards.
- ◆ Commission sends notification of awards to eligible individuals.
- ◆ Eligible individuals begin to receive services and submit invoices to the Commission for payment.

FUNDING CATEGORIES:

- ◆ Adaptive Equipment/Assistive Technology
- ◆ Computers
- ◆ Education
- ◆ Health and Wellness
- ◆ Home Modifications
- ◆ Housing
- ◆ Medical Treatment/Therapy
- ◆ Personal Support Services
- ◆ Psychological Services/Counseling
- ◆ Recreation
- ◆ Transportation
- ◆ Employment/Vocational Services

APPLICATION PERIODS:

First period: October 1, 2002 — November 15, 2002.

Commission recommended awards on December 17, 2002.

Second period: January 2, 2003 — February 14, 2003.

Commission recommended awards on June 17, 2003.

DISTRIBUTING THE BRAIN AND SPINAL INJURY TRUST FUND - THE OUTCOME

To ensure that the Trust Fund is distributed proportionately throughout the state, the Commission divided the state into ten regions. The Commission then divided the total amount of funds available for distribution to each of the ten regions according to population. The map below shows the outline of the ten regions, while the charts shows the distribution of Trust Fund dollars by region and by category for FY03.

AWARD BY CATEGORY FISCAL YEAR 2003 SUMMARY

Category	Amount	%
Adaptive Equipment/Assistive Technology	\$136,284.00	16.81%
Computers	\$22,120.00	2.73%
Education	\$3,360.00	0.41%
Health and Wellness	\$25,710.00	3.17%
Home Modifications	\$152,106.00	18.76%
Housing	\$20,000.00	2.47%
Medical Treatment/Therapy	\$130,868.00	16.14%
Personal Support Services	\$89,787.00	11.08%
Psychological Services/Counseling	\$5,000.00	0.62%
Recreation	\$12,620.00	1.56%
Transportation	\$197,800.00	24.40%
Employment/Vocational Services	\$15,000.00	1.85%
Grand Total	\$810,655.00	100.00%

AWARD BY REGION FISCAL YEAR 2003 SUMMARY

Region	Amount	%
1	\$51,394.00	6.34%
2	\$71,068.00	8.77%
3	\$379,203.00	46.78%
4	\$24,042.00	2.97%
5	\$47,700.00	5.88%
6	\$40,149.00	4.95%
7	\$20,000.00	2.47%
8	\$56,889.00	7.02%
9	\$77,736.00	9.59%
10	\$42,474.00	5.24%
Grand Total	\$810,655.00	100.00%



THE ROAD TO INDEPENDENCE

Michael Ramey is clear about what he needs to live independently. The 43-year-old Decatur resident has spent the past 23 years recovering from and living with a traumatic brain injury. In that time he has managed to teach himself to speak again, get out of a nursing home, and create a life of independence.

This journey towards independence began on Christmas Eve, 1980, when Michael was seriously injured in a car accident. As a result of the accident, Michael sustained a traumatic brain injury that affected his speech and movement, and was in a coma for six months. Some time after coming out of the coma, Michael was able to live at home with his grandmother, however, after two years she was unable to care for him any longer and Michael was transferred to a nursing home. He was unable to walk or talk and spent much of his time laying in bed.

Michael reports that one day he decided that he didn't want to live this way any longer, and that it was going to be up to him to "start doing something." As he lay in bed, he began to recite the alphabet repeatedly in an effort to re-learn how

to speak. He worked diligently with the nursing home staff to re-learn how to walk. As a result, Michael has improved his ability to speak and is able to use his legs to propel himself around in his wheelchair.

After thirteen years in the nursing home, Michael decided that he was too young to live in a nursing home and began to make efforts to get out. He had developed a circle of friends from his church who assisted Michael in applying for the Independent Care Waiver Program (ICWP). In 1996, Michael was told that he was approved for the ICWP, and his friends began to work to find him an apartment and gather all of the things that he would need to live on his own. By 1997, Michael was living in his own apartment.

Michael says that he loves living independently. He enjoys his one bedroom apartment in Decatur, where he has neighbors that he visits and his pet bird. He is able to "come and go" as he pleases, stay up and watch t.v., and visit friends and relatives. He is a member of Side-by-Side Clubhouse, a community day program for people with brain injuries. With the help of the ICWP, Michael has two attendants, Annette and Larry, who assist him with hygiene and meals on a daily basis.



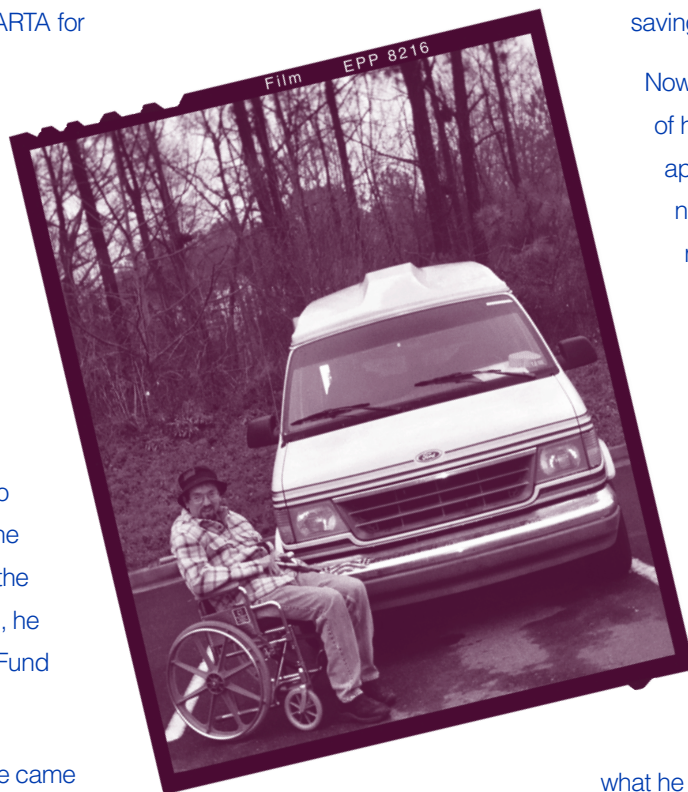
However, as Michael is quick to point out, the one element that was lacking in his ability to live completely independently was transportation. Since leaving the nursing home, Michael has had to rely on MARTA for his transportation, which means that he has to plan his outings well in advance, and is generally late to his appointments. For the past several years, Michael has made efforts to purchase a lift-equipped van, however, the high cost of vans prevented him from being able to do this. Undaunted, Michael told his friends, relatives, and Clubhouse members of his desire to purchase a van, and remained determined to find a way to do so. And so it was that on the first day that he met Kristen Vincent, Executive Director of the Brain and Spinal Injury Trust Fund Commission, he insisted on telling her that he wanted the Trust Fund to assist him in purchasing a van.

Michael's opportunity for increased independence came when his friends found an affordable, used lift-equipped van. Since his accident, Michael had been saving money. He planned to put his savings towards the purchase of the van, but his savings would not be enough for the total cost of the van. Michael submitted an application to the Trust Fund in which he requested \$5,000 to help him purchase the van. The Commission approved Michael's request, and in the fall of 2003, Michael was

able to realize his dream of owning his own vehicle. He purchased a white and green Ford van with a lift, paying for it in full using his savings and the Trust Fund distribution.

Now, Michael feels that he is truly independent. With the help of his attendants, Michael is able to go where he wants, make appointments on time, and be more involved in the community. Most importantly, Michael is now able to visit his grandmother on a regular basis. Without the van Michael was only able to visit her a few times a year. With the van, he is able to see his grandmother, who lives in Buford, GA, at least twice a month. According to Michael, his grandmother may be the one person who is more excited about the van than Michael.

Michael says that the key to his success in living independently is his "circle of support." Beginning soon after his injury, Michael began to surround himself with friends who could advocate for him, and assist him in getting the things he needed. And he has always been determined and clear about what he needs. Michael has two pieces of advice for other people who have traumatic injuries: "if you need help, don't be afraid to ask for it," and "save any money that you can." Michael has shown how a Trust Fund distribution, when paired with a strong support system and additional resources, can make the difference in a person's ability to live independently, and with self-determination.



2003 “LET US HEAR FROM YOU!” Focus Group Tour

OVERVIEW

In January, 2003, the Commission launched the 2003 Let Us Hear From You! Tour, to gather information and input from people across the state that would assist the Commission in developing long-range goals for the distribution of the Trust Fund. The focus of the Tour was a series of focus groups held in nine cities across the state including: Albany, Augusta, Athens, Atlanta, Columbus, Gainesville, Macon, Savannah, and Warm Springs. The focus groups were comprised of people with traumatic brain and spinal cord injuries, caregivers, advocates in the disability field, service providers, representatives of state agencies, and community leaders. To increase the opportunity for input, the Commission also hosted a web-based survey for individuals that were unable to attend the focus group meeting in their local area. The Tour and survey concluded in April, 2003.

Altogether, the Commission received input from 189 people with traumatic injuries or their caregivers; 101 services providers, and representatives of state agencies; and 12 advocates and community leaders. The input focused on four issues:

- ◆ Access to Services;
- ◆ Access to Information;
- ◆ Awareness of Disability Issues and Ability to Live Independently; and
- ◆ Awareness of the Trust Fund.

RESULTS

Access to Services: “You have to kiss a lot of frogs before you find your prince.”

In general, individuals with traumatic injuries and their caregivers reported that they had difficulty finding available services and funding, and that the quality of services

was not always adequate. In the words of one respondent, “you have to kiss a lot of frogs before you find your prince” when it comes to locating high-quality services for people with disabilities.

The most common services that people had received were: vocational rehabilitation services, attendant care (generally for those on Waiver programs), and support from local support groups for people with traumatic injuries. The two primary obstacles that the majority of individuals and caregivers faced were lack of awareness of existing resources and lack of funding for available services. Individuals reported that they generally received limited information on available services from service providers and often had to spend a great deal of time trying to find services on their own, particularly since there was no central source of information on available resources. Further, accessing funding for services proved challenging because of eligibility restrictions, lack of awareness of available funding, or limited available funding. In addition, other obstacles included:

- ◆ Lack of necessary services, particularly in rural areas;
- ◆ Lack of transportation to access services, particularly in rural areas;
- ◆ Difficulty in navigating the state system of services, and frustrations related to dealing with “red tape” of state systems; and
- ◆ High turnover or large caseloads of program staff.

Access to Information: Internet is King

As stated before, many individuals across the state reported that they received little information on available services and funding from service providers, and were often left to their own devices to research available resources. As a result, the overwhelming majority of individuals with traumatic injuries and their caregivers

reported that they received most of their information about traumatic injuries, rehabilitation, and resources from the internet. Those individuals who did not have access to the internet reported that they had to be diligent and persistent in getting information about available resources, but in many cases the person ended up missing out on valuable resources because of a lack of information.

Awareness of Disability Issues and Ability to Live Independently:

Room for Improvement

When focus group participants were asked to rate the prevailing attitudes about disability in their local communities, the majority of them rated their communities low. Respondents reported a variety of problems that they experience as people with disabilities in their communities, including:

- ◆ Public places, including doctors' offices, theaters, and other businesses that are inaccessible to people with disabilities;
- ◆ Communities that are unaware of what is needed to make places accessible for people with disabilities;
- ◆ Businesses that are unwilling to make accommodations for accessibility;
- ◆ People who are uncomfortable being around people with disabilities.

When asked what people with Traumatic Brain Injuries (TBI) and Spinal Cord Injuries (SCI) need to live independently, the most common responses were:

- ◆ Attendant care services;
- ◆ Affordable, accessible, and reliable transportation;
- ◆ Affordable, accessible, and acceptable housing;

- ◆ Home modifications;
- ◆ Employment; and
- ◆ Financial assistance.

Awareness of the Brain and Spinal Injury Trust Fund: Increase Awareness

Finally, participants were asked about their level of awareness of the Trust Fund. In general, the majority of respondents had not heard about the Trust Fund, or knew very little about the program. Those who were familiar with the Trust Fund had either supported the legislation to create the Trust Fund, heard about it through their support groups, and had been told about it by a service provider. Few of the respondents had applied to the Trust Fund. It should be noted that, at the time of the Focus Group Tour, the Trust Fund application process had been in operation for only five months.

Participants were asked to list the ways in which the Trust Fund could best meet the needs of people with TBI and SCI in Georgia. The majority of the respondents listed the following priorities:

- ◆ Increase visibility, through website, brochures, newsletters, marketing, etc. Heavy emphasis was placed on the website;
- ◆ Make application process as accessible as possible through web-based applications, ongoing application periods, and simple application forms;
- ◆ Create ability to respond to immediate or emergency needs and to fund needs that cost more than \$5,000; and
- ◆ Use the Trust Fund to influence public policy and educate the system about the needs of people with traumatic injuries.

2003 - 2008 STRATEGIC PLAN

Based upon information gathered during the focus group tour, from the distribution process, and from an assessment of existing resources and issues for people with traumatic injuries, the Commission developed goals for the next five years for three areas of the organization: program, organization, and development.

PROGRAM

Goal 1: Enhance Distribution Program Effectiveness and Accessibility

Goal 2: Develop Policy Program

Goal 3: Enhance Statewide Infrastructure

Program objectives include developing an ongoing application process and a local presence for the Trust Fund; increasing the Commission's presence in policy-making arenas; developing a plan for strengthening the Central Registry; and establishing the Commission's role as Lead Agency for traumatic injuries in Georgia.

ORGANIZATION

Goal 1: Enhance Commission Effectiveness

Goal 2: Enhance Staff Effectiveness

Goal 3: Strengthen Financial Systems

Organization objectives include increasing Commission attendance; increasing public involvement in the Commission's work; assessing the need for hiring and training additional staff; and developing long-term projections for the distribution of Trust Fund dollars.

DEVELOPMENT

Goal 1: Increase Awareness and Use of Trust Fund

Goal 2: Increase Trust Fund Resources

Goal 3: Increase Collaborations

Development objectives include increasing marketing of the Trust Fund, including the further development of the Commission's website; teaching individuals how to access the Trust Fund; developing a plan for increasing the participation of courts in the court fee collections process; and developing collaborations and partnerships to maximize Trust Fund resources.



Members of the Commission and local advocacy groups met to develop the Commission's five year strategic plan.

FY03 FINANCIAL DATA ♦ JULY 1, 2002 - JUNE 30, 2003

The Budget Process

Each year, courts throughout the state charge and collect the 10% surcharge on DUI fines as required by OCGA 15-21-149, and submit these funds to the Office of the Treasury for deposit into the Brain and Spinal Injury Trust Fund. The Commission is authorized to spend and disburse available funds from the Trust Fund after it has been appropriated by the General Assembly. The Commission bases its request for a state appropriation on the amount of collections for the previous year.

FY03 Budget

FY03 represented the first year of distribution of the Trust Fund. With this in mind, the General Assembly approved an initial appropriation of \$500,000 to give the Commission a chance to establish its distribution program and test the distribution process. As the Commission proved successful in distributing the Trust Fund, it requested a supplemental appropriation of \$500,000 to provide for additional distributions, which the General Assembly approved. Thus, the Commission had a total budget of \$1,000,000 for FY03.

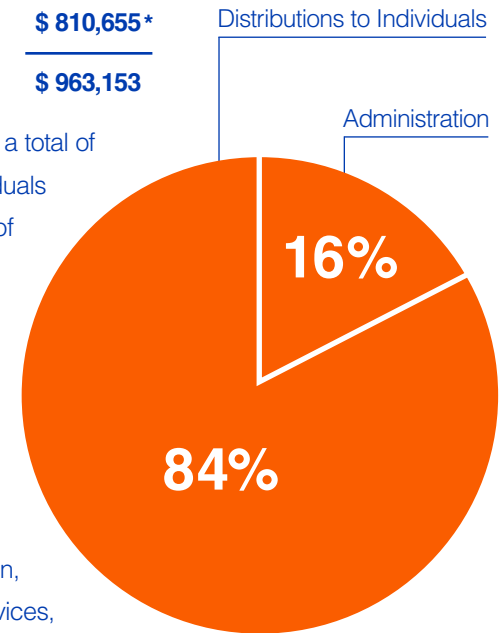
To continue to establish the distribution program and increase the amount of funds available for distribution to individuals with traumatic injuries, the Commission has requested an appropriation of \$2,000,000 for FY04. The Commission has the capacity to distribute additional funds, and the need for Trust Fund distributions clearly exists. Thus, the Commission will continue to increase its appropriation request in proportion with the rate of collections in the future.

The total amount of funds collected for DUI surcharges and deposited into the Trust Fund for FY03 was \$2,028,482.

EXPENDITURES

Administration	\$ 152,498
Distributions to Individuals	\$ 810,655*
Total Expenditures	\$ 963,153

* The Commission approved a total of \$810,655 in awards to individuals for FY03. However, as of 6/30/03, actual payments towards those awards totaled \$123,542. This is because some of the awards were not approved until 6/17/03, leaving payments to be made in FY04. In addition, some awards were for services, such as attendant care and various kinds of therapies, which began in FY03 but continued into FY04.



REVENUE

FY03 Appropriation	\$500,000
Supplemental Appropriation	\$500,000
Total Revenue	\$1,000,000

MEET OUR COMMISSION MEMBERS

ANNETTE BOWLING, VICE CHAIR

In addition to serving as Vice Chair of the Commission, Annette is the Executive Director of the Albany Advocacy Resource Center (ARC). Born in Lakeland, Georgia, she resides in Doerun with George, her husband of 31 years. They are the proud parents of son Samuel Connell and grandparents to Kaycee Connell. Annette has been active with a number of organizations including: the Georgia ARC Network; the Georgia Academy for Children and Youth Professionals; the Blue Ribbon Task Force on Community Services, and the Commission on Mental Health/Mental Retardation/Substance Abuse (MH/MR/SA) Commission. Annette has also received numerous awards. Annette was appointed to the Commission by the Governor in 1999. With regard to her vision for those with brain and spinal injuries Annette says, "I believe we have a duty to see that everyone has the same opportunities to enjoy the same rights and freedoms, regardless on ones' abilities or disabilities."

PATRICIA COCCIOLONE

Pat came to the Brain and Spinal Injury Trust Fund Commission through a life-changing experience. An eleven-year veteran of the Atlanta Police Department, Pat was responding to a domestic call with her partner on October 12, 1997, when her partner was killed and Pat was critically injured. She sustained a number of injuries including a shattered hip and a traumatic brain injury. Following her rehabilitation at Shepherd Center, Pat has become involved in the community and become an advocate and spokesperson for people with traumatic brain injuries. She was part of a special program entitled, "It's still my life: Surviving Traumatic Brain Injury," that aired on Georgia Public Broadcasting, and wrote an article for a Shepherd Center newsletter which can be found on the Internet. Pat was appointed to the Trust Fund Commission by the Governor in 1999.

SUSAN B. HABERKORN

Although her birthplace is Detroit, Michigan, Susan now makes her home in Thomasville, Georgia. Susan represents the Georgia Hospital Association on the Commission, where she has been a member since 1999. She is currently Vice President of Rehabilitation Services at the John D. Archbold Memorial Hospital in Thomasville. Susan divides her volunteer time among several organizations including: Kiwanis, the Court Appointed Special Advocates (CASA) board, the Thomas County Chamber of Commerce, and committee work with Southwest Georgia Technical College. She is listed in Who's Who. Her goal for people with brain and spinal cord injuries is, "Reintegration into society - education, work, quality of life, as abilities permit."

LARRY HUGGINS

Larry was born in Alabama but resides in Warm Spring, Georgia. He recently retired as Director of Marketing for the Roosevelt Warm Springs Institute for Rehabilitation. Larry sustained a spinal cord injury in 1968. In addition to his work with the Commission, Larry serves the community on a variety of boards including: the Georgia Rehabilitation Association; the Georgia Self Insurance Association; and the Professional Rehabilitation Specialists of Georgia. Larry's vision for those with traumatic brain and spinal cord injury is, "That people with spinal cord injury and brain injury are able to live as independent as possible. That all community resources are available to them. That they have an opportunity to lead productive and fulfilling lives."

J. HUNTER HURST

In addition to serving on the Commission, Hunter is the Executive Director of the Georgia Infirmary, Inc., a provider of home and community-based services, and the Georgia Infirmary Non-Profit Housing Corporation, a provider of affordable housing options for elderly and disabled persons in Savannah, Georgia. He also directs the SOURCE project, a Medicaid demonstration project for enhanced case management and primary physician care for over 800 chronically ill persons in 14 counties in southeast Georgia. In a 24-year career in home and community-based services, Hunter has developed rural hospital and physician networks, the first comprehensive outpatient rehabilitation facility licensed in the nation, and numerous demonstration projects to improve home and community-based services for the elderly and disabled. Hunter was appointed by the Governor to serve on the Commission in 1999.

SUSAN JOHNSON

Born in Columbus, Ohio, Susan resides in Alpharetta, Georgia with Mark, her husband of 21 years, and their daughter Lindsey, who is currently attending the University of Tennessee. Mark is a C-5 quadriplegic and works at the Shepherd Center where Susan serves as the Director of Brain Injury Services. Susan has over 22 years of experience as a speech language pathologist developing brain injury programs. She was appointed to the Commission in December, 2002. Susan is a member of ASHA, the American Speech and Hearing Association; is a certified case manager with the Case Management Society; and a member of both the National Brain Injury Association and the Brain Injury Resource Foundation of Georgia. She serves the community in a variety of venues. Susan's vision for people with brain and spinal injuries, "That people with brain and spinal cord injuries can get assistance, live in the community and live a quality of life that every American has the right to."

RACHEL JONES

A social service worker and counselor with Anchor Hospital, Rachel was born in Alabama and lives in Palmetto, Georgia. In 1992, a drunk driver hit her car leaving Rachel with many physical injuries including a brain injury. She began working with the group of citizens attempting to start the Commission in 1996 and was appointed to the Commission in 1999. Since her accident, Rachel has made great strides. In 1996 she received her Master's Degree in Professional Counseling from West Georgia College and became a certified trauma counselor in 1999. Along the way, she has received numerous awards and honors including: the Advocacy Award from the Brain Injury Association of Georgia and the "Service of Excellence" pin from Anchor Hospital. Rachel's vision for people with brain and spinal injury is, "To encourage everyone to recognize their abilities and talents as well as to use those abilities and talents to improve their own lives as well as the lives of people they come in contact with."

WOODROW W. LEAKE

Dr. Leake is a native Georgian born in Rome. He currently resides in Atlanta with his wife Pat. They are the proud parents of two daughters, Jennifer and Lisa, and grandparents of two granddaughters. A spinal cord injury survivor, Woodrow brings insight into SCI along with years of experience in the field. Woodrow served as President and CEO of the Brain Injury Association of Georgia until 2003, and was appointed to the Commission in November, 2002. A Certified Association Executive with the American Society of Association Executives, Woodrow serves the community in many venues that include: the Children's Healthcare of Atlanta Rehabilitation Advisory Board; the Brain Injury Research Institute Board at Emory University; and the Walton Rehabilitation Hospital Community Outreach Advisory Board. Woodrow shares the Vision of the Commission, "A Georgia where people with Traumatic Brain and Spinal Cord Injury are valued, have equal opportunity and real choices."

ESTELLE LEE MILLER

A Charter Member of the Commission, Lee was born in New York and resides in Columbus, Georgia. She is an attorney and consultant and the proud mother of Robert McCready Miller and Linda Jean Duff Miller. Lee's passion for this field is due in part to the fact that her daughter Linda has a traumatic brain injury. Lee holds membership in numerous organizations including: the President's Council on the 21st Century Workforce, Skills Gap committee; the World Committee on Disability; the National Association of Governors' Councils; the Georgia State Rehabilitation Council and both the Georgia and the National Rehabilitation Associations. She has also received numerous honors and awards. Her vision for people with traumatic brain injury and spinal cord injury is, "Access to services leading to full integration into the community."

JUSTIN PRESSLEY, TREASURER

Born and raised in Gainesville, Georgia, Justin became involved with the Commission in December 2000. A quadriplegic as a result of a motorcycle accident on June 13, 1998, Justin brings added insight into the needs of those with spinal cord injuries. He is a consultant working in the field of websites and disability issues. In addition to his duties with the Commission, Justin serves on the board for the Access Center for Independent Living in Gainesville.

DAVID W. RENZ

David was born in Durham, North Carolina but makes his home in Rocky Face, Georgia with his wife, Mary Julian, and their daughter, Lexie Anne. He is a Fuel and Lubricants Distributor and a T-8 paraplegic. As the first Chairman for the Commission inducted in 2000, David brought years of experience to his position including: Kiwanis Club; United Way; Creative Arts Guild Trustee; Dalton Whitfield Disability Awareness Chair; Deacon at First Presbyterian Church; and Zone Chairman for Ducks Unlimited. He has received a number of awards including: American Heart Association Cardiac Arrest Award; Hank Dixon VIP Award; the Creative Arts Guild Chair 40th Anniversary. David's vision for those with brain and spinal cord injuries is, "To help every person with a spinal cord injury or traumatic brain injury to lead a normal life without any outside barriers."

ROCKY ROTHROCK, SECRETARY

Rocky lives in Douglasville, Georgia with his wife and grandson. A survivor of a traumatic brain injury, Rocky has become a powerful and effective advocate for people with traumatic brain injuries and other people with disabilities. He has extensive involvement in citizen advocacy and is a member of a number of organizations and boards. He founded F.A.S.S.T., a support group for people with traumatic injuries and participated in the original effort to establish the Trust Fund. Rocky was appointed to the Commission by the Governor in 1999.

DENNIS B. SKELLEY, CHAIR

In addition to serving as the Chair of the Commission, Dennis is the President and CEO of Walton Rehabilitation Hospital in Augusta, Georgia. Born in Detroit, Michigan, Dennis lives with his wife and three children in Evans, Georgia. Dennis began his career as a physical therapist and went on to pursue his Master's degree in Health Care Administration with a goal to lead a physical rehabilitation center. He began working on Walton Rehabilitation Hospital in 1986 and its doors were opened in March of 1988. He continues to develop medical rehabilitation programs, residential settings, and assistive technology offerings. He serves on an number of local boards and has received several honors for his leadership. He was appointed to the Commission in December 1999. His vision for the commission is mirrored in its mission statement: "The Trust Fund Commission improves the quality of life of Georgians with Traumatic Brain and Spinal Cord Injury by distributing funds and resources, and making policy recommendations to enhance statewide infrastructure."

COMMISSION STAFF

Kristen E. Vincent, Executive Director

Evelyn Craft, Financial Assistant

Eleanor Perry, Administrative Assistant

Anna Santiago, Director of Distribution

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