One brief moment in time can change a life forever.

A spinal cord injury can happen to anyone—at any time.
# TABLE OF CONTENTS

<table>
<thead>
<tr>
<th>Section</th>
<th>Page</th>
</tr>
</thead>
<tbody>
<tr>
<td>A Spinal Cord Injury Can Happen to Anyone at Anytime / Statistics</td>
<td>3</td>
</tr>
<tr>
<td>Arkansas Spinal Cord Commission</td>
<td>4</td>
</tr>
<tr>
<td>Commission Chair &amp; Executive Director’s Summary</td>
<td>5 - 9</td>
</tr>
<tr>
<td>What We Do</td>
<td>10</td>
</tr>
<tr>
<td>Our Financials</td>
<td>11 - 14</td>
</tr>
<tr>
<td>Arkansas Trauma</td>
<td>15</td>
</tr>
<tr>
<td>Rehabilitation Program</td>
<td></td>
</tr>
<tr>
<td>Our Staff</td>
<td>17 - 18</td>
</tr>
<tr>
<td>Regional Offices</td>
<td>20</td>
</tr>
<tr>
<td>ASCC Commission Members</td>
<td>21</td>
</tr>
<tr>
<td>Organizational Chart</td>
<td>22</td>
</tr>
</tbody>
</table>
The prevalence of individuals with spinal cord injuries in the United States is estimated at 700,000 individuals, with approximately 12,000 new cases each year. Until World War II, the average life expectancy for a spinal cord injured patient was 6-12 months post injury with up to 80% of patients dying in the first two weeks. This short life expectancy was secondary to sepsis from kidney or bladder infections, pneumonia or pressure sores. Since about 1940, the life expectancy of spinal cord injured patients has improved significantly, and now approaches that of the average population, depending upon level of and age at injury.

ARKANSAS SPINAL CORD COMMISSION (ASCC) HISTORY

The Arkansas Spinal Cord Commission is a health related agency of the State of Arkansas, established by Act 311 of 1975 and administered in accordance with Arkansas Code Annotated (ACA) 20-8-201 – 206.

At the 1975 legislative session in January, the members of the Arkansas Legislature passed Act 311 to establish the Arkansas State Spinal Cord Commission. This was the first state agency in the United States to be responsible solely to individuals with spinal cord disabilities (SCD). In July 1975 the first Arkansas State Spinal Cord Commission was given the oath of office at the State Capitol by Governor David Pryor.

In 1977, the Arkansas State Legislature approved a second ASCC initiative. That was the establishment of the Arkansas Spinal Cord Disability Registry. Recognizing the value of the data collected, a mechanism was needed to identify and offer services to Arkansans with spinal cord disabilities. Act 330 of 1977 mandated the Arkansas State Spinal Cord Commission shall establish and maintain a central registry of persons with SCD. Every public and private health and social agency and attending physician shall report to the commission within five (5) calendar days after identification of any person with a spinal cord disability. However, the consent of the individual shall be obtained prior to making this report. The intent of the Registry is to insure the referral of all persons with spinal cord disabilities and to assure they receive appropriate rehabilitative and other needed services.

The registry was one of the first in the country. The state of Florida mandated a similar registry in 1990. Today, Arkansas and Florida maintain dynamic registries that update contact information on the individuals, similar to that maintained by the federal spinal cord injury model systems.

A spinal cord injury can happen to anyone at any time.

THREE (3) PEOPLE EACH WEEK

More than three a week— is the estimated number of people in Arkansas identified as sustaining a new spinal cord disability or approximately 179 new cases per year.

Nationally, it is estimated that the annual incidence of spinal cord injury (SCI) is approximately 40 cases per million population in the U.S. or approximately 12,000 new cases per year. Every 41 minutes a person in the United States sustains a spinal cord injury.

Over 2,400 PEOPLE

The number of ASCC clients with a spinal cord disability (SCD)—in Arkansas.

Approximately 700,000 Americans have disabilities of the spinal cord. These disabilities include traumatic spinal cord injury, multiple sclerosis, spina bifida, amyotrophic lateral sclerosis (ALS), and syringomyelia among others.

2-3 YEARS

The average time it takes to attain optimal independence following a spinal cord injury.

$2.5 MILLION

The average lifetime cost of persons with a spinal cord injury.

* These costs are based on the average yearly health care and living expenses. The estimated lifetime costs that are directly attributable to SCI vary greatly according to severity of injury.

OUR MISSION
The Arkansas Spinal Cord Commission will administer a statewide program to identify and meet the unique and lifelong needs of people with spinal cord disabilities in Arkansas.

WHO WE ARE
10 regional offices, 15 case managers implementing client programs and services to all 75 counties. A staff of 11 in the Little Rock central office orchestrates daily activity in support of statewide clients with spinal cord disabilities (SCD) in Arkansas.

Serving over 2,400 individuals annually, ASCC is the leading source for information and guidance on all aspects of SCD in Arkansas.

Our case managers undertake a pivotal role as qualified rehabilitation counselors knowledgeable in the medical aspects of spinal cord injuries, spinal bifida, multiple sclerosis and other spinal cord disabilities, implementing one-to-one customized services for each client. A partial list of responsibilities include: needs and evaluations; regional information services; coordinate service delivery; provide guidance and counseling; advocate on client’s behalf; resource provisions and technical assistance, and assist families in identifying and applying for other available services.

OUR VALUES

RESPECT for those with spinal cord disabilities, for each other and for all communities.

EXCELLENCE in all we do.

ACCOUNTABILITY through transparency and ownership of outcomes.

LEADERSHIP in service and quality of life.

INCLUSION in all communities and within our organization.

INNOVATION in overcoming challenges.

OUR GUIDING PRINCIPLES

Strive for 100% employee-team satisfaction.

Strive for 100% client satisfaction.

Achieve win-win results through the power of partnership.

Work Smart While Remaining Humble.

OUR VISION
Going from Good to Great—Champion excellence in service, advocacy and quality of life for Arkansans with spinal cord disabilities.

Continuously strive to improve programs and professional services to enable people with spinal cord disabilities—To Thrive. Not Just Survive.

“Identify and meet unique and lifelong needs of Arkansans with spinal cord disabilities. Give them the opportunity to live as independently and as productively as they choose.”

It takes every partner giving their best every day. And it takes each of us evaluating what we accomplished yesterday—to see what we can do better today and tomorrow.
Commission Chairman & Executive Director’s Summary

2013 was a year of transformation for the Arkansas Spinal Cord Commission on several different fronts.

Our agency has always been in a continuous cycle of improvement, analysis and action.

For starters, the commission welcomed Patti Rogers as she assumed the duties of ASCC Executive Director. She immediately began orchestrating the agency’s activities and moved strategically forward.

We changed our branding after 38 years. We believe our new updated image and materials better communicate and represent our professional service—inclusive of all people who benefit, or that will benefit, from our programs and services. Emphasis to marketing our services, conferences, prevention programs and tackling accessible parking issues has been sufficient since July 2013.

Another achievement that occurred this year was the implementation of the ASCC website and social media, improving our ability to better communicate to the client base, other vital organizations and the private sector. This venue enables the immediate release of current SCD information, accessible resources online, forms, and many more subjects. Our website will continue to be instrumental in client service and community support in the upcoming year.

We have been busy over the past year with quality improvement projects across the organization including developing a two-year work plan to build and maintain a traumatic brain injury registry.

We’ve developed a standardized client orientation package to ensure that clients across all services receive the right regional information as they enter service with us.

Moving forward we implemented video conferencing to enable us to provide ongoing staff training; case management status-reporting communications; and occasional commission meetings with those across the state. Utilization of this technology has saved our agency in travel expenses, while allowing us to minimize the case manager’s time out-of-the field. It is also a convenient venue for Commission communications.

We are in the first year of our three-year strategic plan, ‘Going from Good to Great.’ We completed the introductory session at the fall statewide case management conference and will continue the program to support our core values and guiding principles in 2014.

The following are our Strategic Directions with highlights of what we have achieved so far.
HIGHLIGHTS

Achieve the greatest results for people with spinal cord disabilities by advancing service access, innovation and excellence.

• We served over 2,400 people with spinal cord disabilities in 2013.
• We served 179 people with new spinal cord disabilities.
• ASCC’s 15 case managers accomplished 6,594 client visits—implementing personalized service needs.
• The ASCC case management program leveraged $1,129,131 to supplement our client services needs from third party resources for goods and services.
• We developed 100 partner matches through our case management support program.
• ASCC built 37 accessible ramps and completed 25 home modifications in 2013.
• We assisted clients as they returned to work through our services.

Maximize our effectiveness through excellence in governance and accountability

• We made organizational structure changes to provide role clarity and better accountability.
• We developed a gap analysis of our case management program, central office operations and its effectiveness.
• We have redesigned our incident management protocol by streamlining incident management reporting, resolution, and data analysis with a goal of continuous quality process improvement and prevention of future incidents. New marketing to support prevention education and staff training will continue in 2014.
• We completed an evaluation of scorecard measures and updated them to align with our three-year strategic plan. New measures include brand recognition, a measure on staff experience with SCD, as well as improvements in financial accountability.

Build recognition as the most reliable voice, advocate and leading expert on living with spinal cord disabilities in Arkansas.

• We achieved changes to policies and procedures.
• We orchestrated efforts to maintain discretionary benefits for our clients. Discretionary benefits support a range of items including medically prescribed equipment such as wheelchairs, braces, wheelchair cushions, adaptive bathroom equipment, medical supplies, medications, and home modifications such as ramps, outpatient clinic and therapy visits, and short-term attendant care.
• We advocated accessible parking issues and continue to work on resolutions, recommendations and other mandates.

Maximize effectiveness by utilizing technology as a benefit

In moving forward we implemented video conferencing to enable us to provide ongoing staff training; case management status-reporting communications; and commission meetings across the state. Utilization of this technology has saved our agency sufficient travel expenses, while minimizing the case manager’s time out of the field.

Unite people and communities to share knowledge and drive change relating to spinal cord disabilities.

In 2013, our Accessible Parking Task Force roster tripled in size as numerous organizations, companies, clients, client families, and concerned citizens came together to work for the cause.
• Marketing and public relations were driven to communicate the ongoing issues experienced statewide as related to accessible parking violations.
• Work immediately began on educational materials; speaking opportunities to increase public awareness and knowledge of the laws with emphasis placed on those with accessible parking license plates and placards about the laws governing usage, and training for law enforcement agencies.
• Moving into 2014, a priority on marketing and public relations will be vital to continue education initiatives and advocating accessible parking laws across Arkansas. Physicians, law enforcement agencies, local and state government involvement will be pursued.

Maximize effectiveness through Equipment Loan Programs – Equipment Recycling Program

ASCC operated 10 regional Equipment Recycling Centers (ERC) located across the state at each regional office location. The ERC is better known as our “Loan Closets.” Equipment needs and distribution are managed by our case managers.

- ASCC “loan closets” contain durable medical equipment such as manual and power wheelchairs, and also walkers, hospital beds, portable ramps, therapeutic cushions, adaptive bathroom equipment and activity of daily living supplies such as ‘reachers’ and skin inspection mirrors.

- While all ERCs have basic equipment, some have specialized equipment and supplies. Unfortunately, due to space and cost, a limited number of items are available, and the specific item or size needed may already be on loan.

- In 2013 we were in a position to loan equipment to 155 ASCC clients who had an emergency or a need for temporary equipment until their permanent equipment could be purchased or repaired.

- We provided 118 loaner manual wheelchairs to clients.

Wheelchair Tire Recycling Program

Having a flat tire on your wheelchair constitutes an emergency. Unfortunately, this often happens when neither ASCC nor durable medical equipment companies are open.

- We made available to ASCC clients the Wheelchair Tire Recycling Program as a great resource.

- Case managers delivered our clients a tire-recycling bag containing two (2) tires, two (2) tubes and instructions on how to change a tire.

Deliver results for people with spinal cord disabilities by increasing and diversifying revenues

Funding is limited for client purchases and it is the responsibility of the case manager to work with each client to find all other similar benefits before making a purchase.

Purchase services for persons with spinal cord disabilities in Arkansas.

A spinal cord injury is one of the most catastrophic and costly injuries sustained by individuals. An estimate of lifetime costs average 2 to 3 million dollars, depending upon age at injury. In an attempt to assist individuals and families in obtaining needed equipment, home modifications and medical supplies, the Arkansas Spinal Cord Commission (ASCC) assisted clients that met ASCC financial criteria, and all similar benefits such as insurance coverage or other program eligibility has been exhausted.

- These include purchases of medically prescribed equipment such as wheelchairs and repairs, braces, therapeutic cushions, adaptive bathroom equipment, emergency medications and medical supplies, and other medical equipment.

- Minor home modifications ($2,000 maximum expenditure), and exterior ramping at the residence.

- Short-term outpatient therapy visits including wheelchair seating evaluations and driver’s evaluations, vehicle hand controls, short term attendant care and other needed services related to their spinal cord disabilities.

- All ASCC purchases are made in compliance with State of Arkansas Procurement laws and procedures.
New Program initiated in 2013—‘Client Connections’ at local libraries

ASCC provided clients with information broken down by county and city, and by library branch in their area that can mail materials or deliver materials to them, or have materials ready for someone to pick up for them.

Most libraries were eager to help ASCC clients in any way they could. Although some libraries, mostly due to finances, are unable to offer the mailing of materials or delivery services, the libraries have many interesting and up-to-date items for our clients to enjoy—DVDs, Audio Books, E-books and more.

Library technology has come a long way. ASCC implemented the program to give its clients better access to library needs.

- If our client has a PC or E-Reader at home, they can quickly download books, magazines and more from the comfort of their home by simply entering their library card number.
- Each library requires a card to borrow anything. Luckily, there are some great libraries that are willing to work with our ASCC clients to obtain a card.

All that is asked of our clients is when they call their library to identify themselves as an ASCC client and ask for the contact person on their list. If there is not a person listed, the library is not yet participating in the program.

In 2014 we will continue to work with Arkansas libraries to ensure that all our clients, regardless of age or mobility capability, have access to current books and other materials. Given the great strides in technology, sometimes that new book is just a ‘click’ away!

ASCC Financial Criteria Changes

With the new era of changes at ASCC in 2013, the agency’s financial guidelines were updated. This change will have a tremendous impact on many ASCC clients.

- Case managers gathered information updating the client’s paperwork on file.
- Clients provided the same information that is provided to other agencies to verify their income (examples: SSA award letter, checking and savings accounts statements, personal property assessment, payroll check stubs, etc.)
- Clients also provided receipts or itemized proof (from pharmacies, doctors or hospital bills) of any monthly spinal cord disability related expense. Case managers deducted these expenses from the client’s NET income. In some cases, the resulting deductions aided the client.
- Even though ASCC increased its guidelines, this would primarily affect a family of two or more (a family of 2 is now $1,422). For each additional family member $369 will now be added to the guidelines.

ASCC Education and Training Programs in 2013

We believe no person should be excluded from opportunity to learn about their disability and how to manage related conditions.

A primary role of the Arkansas Spinal Cord Commission is to provide individuals with spinal cord disabilities, their families and caregivers, health care professionals, and the general public with information about spinal cord disabilities.

The Commission utilizes a multifaceted approach to get cutting edge, reliable information about the many causes and effects of damage to the spinal cord, the secondary conditions that result from these disabilities, the latest rehabilitation and other treatments to improve these conditions as well as resources to help individuals with spinal cord disabilities live as independently as they choose.

“Patti Rogers has made a significant contribution to ASCC with 24 years of service to our agency and clients. She assumed the role of Executive Director in June 2013 and soon brought new ideas, motivation, and made sound organizational changes to better accomplish our goals and mission. Her dedication and support for client service and programs is shown through her positive mentorship at meetings, trainings and orientations. It is a pleasure to have such a committed and dedicated individual in the leadership role of the ASCC.”

JON WILKERSON
Commission Chairman
**Spinal Cord Disability Conferences and Workshops**

Each year ASCC offers educational conferences with national, state and local experts providing the latest information on topics of interest to individuals who live with spinal cord disabilities, their families and healthcare professionals. In addition to expert speakers with whom participants have the opportunity to meet and ask questions, the conferences include an exhibit hall featuring the latest assistive technology; wheelchairs and other durable medical equipment; state and not for profit agencies who provide direct services to individuals with spinal cord disabilities; demonstrations of adapted sports; new technology; environmental modifications, and other specialized interest.

Finally, the conferences provide an opportunity for participants to meet and share experiences and ideas with one another. Every two years the Commission hosts a statewide conference in Little Rock. On alternate years, regional conferences are held in smaller communities around the state for those individuals who find it difficult to travel to Little Rock to have the opportunity to attend.

Additionally, ASCC co-host’s the Arkansas Trauma Rehabilitation conference each year in cooperation with the Arkansas Department of Health and the Trauma Advisory Council. The conference targets the needs of acute care and professional trauma rehabilitation. Specialized training workshops on treatment modalities targeting specific rehabilitation disciplines are also provided.

**Spina Bifida CAMP FOR KIDS**

ASCC, in cooperation with Camp Aldersgate and Med Camps of Arkansas, sponsored the 36th annual Spina Bifida Camp. The event was held at Camp Aldersgate in west Little Rock in June 2013. Limited to a small group, 38 children with spinal cord disabilities attended from across the state. The campers participated in activities including canoeing, fishing, swimming, archery, extreme sports, music and crafts. These activities are designed to promote increased independence and mobility. The children have the opportunity to interact with other children who live with spinal cord disabilities.

In addition to a great experience for the children, the week-long camp provides much needed respite for parents.

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We move into 2014 with confidence because we are in a continual pattern of improvement ensuring the ability to provide our clients our best programs and services. We are on track for reaching our goals.

Thank you to those who inspire us to work hard, and to those who support us in doing so.

*Jon Wilkerson*

*Commission Chairman*

*Patti Rogers*

*ASCC Executive Director*
What We Do

Advocacy
We help people living with spinal cord disabilities to find resources they need and provide them with the tools to develop self-advocacy skills.

Information Services
We have many resources available to assist Arkansans with spinal cord disabilities, including our website (www.spinalcord.ar.gov), the Spinal Connection publication, and our case management program implements resource matches for clients across the state.

We connect clients to fully-trained volunteers who can share their experience and knowledge. We connect family members, too.

Public Policy
We provide disability-specific, policy analysis that brings awareness and education to elected officials, and we support our clients through advocacy initiatives that aim to create a more inclusive support across the state.

Regional Services
We encourage and support clients to be as independent as possible. We provide services and programs aimed to provide information, resources, education, and support in the adjustment to having a disability.

SCD Solutions Alliances
ASCC clients can connect with our collaborative network of people and organizations in the SCD communities. We address systemic barriers that affect community participation and optimum health and use customized solutions and proven best practices to help improve the lives of people with spinal cord disabilities in Arkansas.
Our Financials

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<th>CLIENT SERVICES</th>
<th>Actual 2012</th>
<th>Actual 2013</th>
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<td>Short Term Attendant Care</td>
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<td>Medical Equipment Rental</td>
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<td>Medical Transportation</td>
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<td>Activities Daily Living Supplies</td>
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<td>Diagnosis &amp; Evaluation</td>
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<td>3,846</td>
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<td>Vehicle Hand Controls</td>
<td>6,611</td>
<td>17,505</td>
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<tr>
<td>Specialized Goods &amp; Services</td>
<td>6,899</td>
<td>15,889</td>
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<tr>
<td>Medical Supplies</td>
<td>8,407</td>
<td>8,579</td>
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<tr>
<td>Spina Bifida Camp</td>
<td>25,200</td>
<td>24,000</td>
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<tr>
<td>Home Modifications</td>
<td>26,870</td>
<td>18,043</td>
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<tr>
<td>Wheelchair Repairs</td>
<td>63,607</td>
<td>62,211</td>
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<td>Wheelchair ramping</td>
<td>64,365</td>
<td>60,103</td>
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<td>Wheelchairs</td>
<td>103,231</td>
<td>72,665</td>
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<td>Durable Medical Equipment</td>
<td>140,449</td>
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<td><strong>Total</strong></td>
<td><strong>$460,439</strong></td>
<td><strong>$440,804</strong></td>
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2013 proved to be a challenging financial year as client services appropriation was not increased. There has been no substantial increase in client service funding in the past three fiscal years. At year end, $75,000 was provided to assist with financial support for purchases of client equipment, durable medical supplies and home modifications.

In order to mitigate client services, all areas across the agency worked together to postpone or scale back planned spending. The case management program leveraged $1,129,131 in goods and services from third party resources, to supplement client service purchasing. Purchases authorized by ASCC included medically prescribed equipment such as wheelchairs, braces, therapeutic cushions, medical supplies and medications. In addition, the Commission assisted with minor home modifications and ramping, driving evaluations and seating and mobility evaluations.

It should be noted that, when available, ASCC receives financial support from the Arkansas Spinal Cord Foundation (ASCF), a 501(c)3 organization that’s sole purpose is to provide resources, education and support to individuals with SCD.

In 2013 ASCC did not receive assistance from ASCF. However, in December 2013, ASCF received a $100,000 grant from the Craig H. Neilson Foundation. These funds will be implemented in 2014 to supplement ASCC client services through pressure sore prevention and education.

**The ASCC Case Management program leveraged $1,129,131 to supplement our client services needs from third party resources for goods and services.**
Condensed Statement of Financial Activities

In 2013 ASCC received $99,258 dollars less in allocated general revenue funds as compared to 2012 general revenue allocation. Variance in totals of actual 2013 income is due to unspent interest and financial revenues earned.

### INCOME

<table>
<thead>
<tr>
<th>Description</th>
<th>Actual 2012</th>
<th>Actual 2013</th>
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<tbody>
<tr>
<td>General Revenue</td>
<td>2,356,404</td>
<td>2,257,146</td>
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<tr>
<td>TAC/ADH Contract</td>
<td>96,743</td>
<td>226,446</td>
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<tr>
<td>Title XX SSBG</td>
<td>106,005</td>
<td>106,005</td>
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<td>Interest</td>
<td>&lt;2,109</td>
<td>2,490</td>
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<td>Financial Revenues</td>
<td>&lt;2,696</td>
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<td><strong>Total</strong></td>
<td>$2,563,957</td>
<td>$2,596,598</td>
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### EXPENDITURES

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<tr>
<th>Description</th>
<th>Actual 2012</th>
<th>Actual 2013</th>
</tr>
</thead>
<tbody>
<tr>
<td>Client Services</td>
<td>460,439</td>
<td>440,804</td>
</tr>
<tr>
<td>Professional Service Match</td>
<td>373,049</td>
<td>359,423</td>
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<tr>
<td>Long Term Attendant Care</td>
<td>246,800</td>
<td>220,447</td>
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<tr>
<td>Maintenance &amp; Operations</td>
<td>261,339</td>
<td>223,761</td>
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<tr>
<td>Professional Service Contracts</td>
<td>103,394</td>
<td>80,000</td>
</tr>
<tr>
<td>Education &amp; Training</td>
<td>14,323</td>
<td>15,519</td>
</tr>
<tr>
<td>TAC/ADH Contract</td>
<td>96,743</td>
<td>226,446</td>
</tr>
<tr>
<td>Salaries</td>
<td>1,104,612</td>
<td>1,020,311</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td>$2,660,699</td>
<td>$2,586,711</td>
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</tbody>
</table>
2013 Activity and Surveillance Report

A spinal cord injury is one of the most devastating events that can happen in a person’s life. With the right support at the right time, people can defy tragedy and build triumph in their lives. At ASCC, we will do whatever it takes to assist a person to rekindle a passion for life and to develop the courage needed to pursue new dreams with dignity, passion, meaning and hope.

In fiscal year 2013, we pursued to further educate physicians, other healthcare professionals, social workers, the patients and their families or friends on referrals to our registry. Education and awareness is vital to establish proper clarification of client referral and medical eligibility criteria. We encourage referrals be made regardless of a question of eligibility and we will determine how to proceed.

While it is difficult to determine whether changes in the number of new referrals actually denote trends, it is gratifying to see the number of spinal injuries due to motor vehicle crashes decreased slightly, it is concerning to see violence leading to SCI has doubled since 2012. Violence is the second leading cause of SCI in Arkansas.

<table>
<thead>
<tr>
<th>TRAUMATIC BY CAUSE</th>
<th>Number</th>
<th>Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Motor Vehicle crash</td>
<td>33</td>
<td>35%</td>
</tr>
<tr>
<td>Violence</td>
<td>24</td>
<td>22%</td>
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<tr>
<td>Falls</td>
<td>20</td>
<td>21%</td>
</tr>
<tr>
<td>Motorcycle</td>
<td>7</td>
<td>8%</td>
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<tr>
<td>ATV</td>
<td>2</td>
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</tr>
<tr>
<td>Other transportation</td>
<td>1</td>
<td>1%</td>
</tr>
<tr>
<td>Hit by object/Explosion</td>
<td>3</td>
<td>3%</td>
</tr>
<tr>
<td>Diving</td>
<td>2</td>
<td>2%</td>
</tr>
<tr>
<td>Sports Contact /Sports non-contact</td>
<td>4</td>
<td>4%</td>
</tr>
<tr>
<td>Medical / Surgical</td>
<td>2</td>
<td>2%</td>
</tr>
</tbody>
</table>

2013 new traumatic referrals by cause

Total: 98

ASCC’s 15 case managers accomplished 6,594 client visits in 2013—implementing personalized service needs for clients.
### Non-traumatic by Cause

- **Spina Bifida**: 14 (17%)
- **Spinal Spondylosis (Stenosis)**: 12 (16%)
- **Multiple Sclerosis**: 11 (15%)
- **Spinal Tumors**: 11 (14%)
- **Hemorrhage/Thrombosis**: 6 (8%)
- **Transverse Myelitis**: 4 (5%)
- **ALS**: 2 (3%)
- **Friedreich's Ataxia**: 2 (1%)
- **Spinal Abscess**: 1 (1%)
- **Herniated Disk**: 1 (1%)
- **Other Disease Processes**: 17 (21%)

#### 2013 new non-traumatic referrals by cause

<table>
<thead>
<tr>
<th>Category</th>
<th>Number</th>
<th>Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Spina Bifida</td>
<td>14</td>
<td>17%</td>
</tr>
<tr>
<td>Spinal Spondylosis (Stenosis)</td>
<td>12</td>
<td>16%</td>
</tr>
<tr>
<td>Multiple Sclerosis</td>
<td>11</td>
<td>15%</td>
</tr>
<tr>
<td>Spinal Tumors</td>
<td>11</td>
<td>14%</td>
</tr>
<tr>
<td>Hemorrhage/Thrombosis</td>
<td>6</td>
<td>8%</td>
</tr>
<tr>
<td>Transverse Myelitis</td>
<td>4</td>
<td>5%</td>
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<tr>
<td>ALS</td>
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<tr>
<td>Friedreich's Ataxia</td>
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<tr>
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<td>1%</td>
</tr>
<tr>
<td>Herniated Disk</td>
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<td>1%</td>
</tr>
<tr>
<td>Other Disease Processes</td>
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<td>21%</td>
</tr>
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</table>

**Total**: 81
Arkansas Traumatic Rehabilitation Program

The Arkansas Trauma Rehabilitation Program (ATRP) was established though a Memorandum of Agreement with the Arkansas Department of Health and the Arkansas Spinal Cord Commission (ASCC). Through educational and resource development initiatives, ATRP is working toward increasing accessibility to comprehensive, cutting-edge rehabilitation care and facilitating community reintegration for Arkansans that have survived traumatic injuries.

Traumatic Brain Injury (TBI) Central Registry

Arkansas Trauma Rehabilitation Program implemented the TBI Registry on November 1, 2013. Since the implementation, the TBI Registry has received a total of seventy-seven (77) referrals.

Arkansas Statute §20-14-703 requires that all hospitals, attending physicians, public and private social agencies refer every Arkansas resident who has sustained a newly identified moderate to severe traumatic brain injury to the ATRP TBI Central Registry. These referrals are required within five (5) days of diagnosis/identification of the injury as a TBI.

ATRP Trauma Rehabilitation Conference / Educational Initiatives

Once a year, ATRP sponsors a conference for healthcare professionals. A variety of national experts in the field of trauma rehabilitation come to Little Rock each year to increase the quality and quantity of continuing education available to healthcare professionals in our state.

ATRP works with other state agencies and health care providers to increase educational opportunities. Specifically, ATRP co-sponsors the Annual Brain Injury Conference held in Hot Springs each year with NeuroRestorative Timber Ridge and Mercy Hot Springs.

ATRP Resource Development

ATRP developed a comprehensive 32-page resource guide and informational packet for TBI survivors and their families. These packets are provided to the acute care hospitals for distribution to all referrals to the TBI Registry.

A web-based disability resource site is currently under development. This will be a site that can be used by healthcare professionals and individual Arkansans searching for resources in their particular area to meet a variety of post-injury needs. This site is set to launch in early 2014.

In an effort to better serve the rural population of Arkansas, ATRP entered into an agreement with UAMS Department of Physical Medicine and Rehabilitation and the UAMS Distance Learning Center for the creation of the TRIUMPH (Tele-Rehabilitation Interventions Through University-based Medicine for the Promotion of Healing) Call Center. This will be a 24/7 service linking primary care and emergency physicians as well as individual Arkansans with cutting edge clinical information for the care and treatment of individuals that have sustained a spinal cord injury. TRIUMPH will be implemented in 2014.

ATRP developed a comprehensive 32-page resources guide and for TBI survivors and their families. A web-based disability resource site is currently under development to launch in early 2014.
**Jimmy Gray**  
**Little Rock, AR**  
Jimmy sustained his spinal cord injury due to a motor vehicle crash and is a T11 complete paraplegic.

“When you’re newly injured, everything seems bad but time heals all wounds and you get better each day, learn how to do new things, and life goes on.” Jimmy praises ASCC services and says that working with his case manager, who gave him assistance through various issues before him, has been invaluable in his spinal cord injury journey and learning his disabilities.

Jimmy and his family live in Little Rock and his job allows valuable time to be with family and attend to personal matters. Jimmy worked prior to his spinal cord injury and was determined not to sit around the house wanting work to be part of his life again. Jimmy would love to work more hours, but unfortunately can only work part-time to still utilize his SSDI and Medicare benefits. When asked what he least enjoyed about his job, Jimmy replied, “I don’t like the way the system doesn’t allow you to earn more income while receiving entitled benefits.” Jimmy’s dream and goal in life is to go to college and to become a basketball coach.

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**LaDanté Walker**  
**Hot Springs, AR**  
LaDanté sustained a tetraplegic spinal cord injury as the result of a motor vehicle crash. He began working with an ASCC case manager while still in the hospital and he says, “He helped me better understand my situation and also look beyond it to how I could live a fulfilling life with my injury.” After rehabilitation, LaDanté returned to work as a counseling support manager and waiver advocate. Walker enjoys his job because he can help other people with disabilities maintain their independence.

LaDanté says his employer provided a raised desk, a phone headset and an iPad to enable Walker to do his job. His co-workers provide encouragement and support.

“I could not afford to live on my benefits alone. It is good to have faith in yourself, but what are you doing to show God you trust Him. We as disabled people can sit around and wait on life to get better, but what are we willing to do to make life better. I used to tell myself no matter what I do it can only be half as good. Not realizing the fact that my half was as good as it needed to be because it was my best.”
Our Staff

ASCC spans across Arkansas. We are fortunate to have 26 remarkable and dedicated staff working each day to support Arkansans with spinal cord disabilities. Their combined qualifications as rehabilitation counselors, skilled case managers, qualified support staff, relentless passion, expertise, wisdom, and can-do spirit, create a whole that is truly greater than the sum of its parts.

More than 35% of our staff has been with the ASCC ten years or more. In fact, three staff members have provided their services for over 24 years including Patti Rogers, ASCC executive director; Janet White, Magnolia regional office case manager; and Bobby Johnson, Pine Bluff regional office case manager. This commitment of our staff to the people we serve gives our agency the roots it needs to succeed while ‘going from good to great.’

It is this dedication that helps to ensure that the vital work of ASCC has the greatest impact for people with spinal cord disabilities.

The past year has been challenging due to new responsibilities, and vast case loads experienced in three of the state’s regions showing growth patterns in Arkansas.

2013 turnover in ASCC Staff and management transitions included 24-year tenure as client services administrator of the case management program, Patti Rogers, to the leadership role of ASCC as its executive director. Even though the transition was smooth, case management responsibilities changed, prompting new training; replacing case manager positions of those retiring or promoted; replacement of administration specialists in three regional offices set the team back. As well as new people came on and were learning new roles, the staff was taking on more responsibilities to fill gaps in the agency.

The upside of this situation is under new leadership, we have had the chance to re-evaluate our internal operations; policies and procedures; set better efficiency and measureable standards, and most importantly identified the agency’s staff need. ASCC’s Staff united as a team, partnering to do whatever it takes to assist a person to rekindle a passion for life and to develop the courage needed to pursue new dreams with dignity, passion, meaning and hope.

“We are ever thankful for our staff and their enthusiasm, perseverance and commitment. Our staff stands strong even in a storm. They are pleased when the sun shines into their clients’ lives, and they offer expertise and genuine support to those who strive for independence after a spinal cord injury. With this amazing group of staff, we are well positioned to provide an abundance of service excellence to our clients in the coming year.”

Patti C. Rogers
Executive Director
2013 client caseload was over 2,400 with 179 new cases reported from 75-county service areas

<table>
<thead>
<tr>
<th>Open Cases by Office</th>
<th>Number</th>
<th>Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Little Rock</td>
<td>798</td>
<td>33%</td>
</tr>
<tr>
<td>Magnolia</td>
<td>294</td>
<td>12%</td>
</tr>
<tr>
<td>Fayetteville</td>
<td>204</td>
<td>9%</td>
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<tr>
<td>Fort Smith</td>
<td>198</td>
<td>8%</td>
</tr>
<tr>
<td>Hot Springs</td>
<td>172</td>
<td>7%</td>
</tr>
<tr>
<td>Jonesboro</td>
<td>171</td>
<td>7%</td>
</tr>
<tr>
<td>Pine Bluff</td>
<td>143</td>
<td>6%</td>
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<tr>
<td>Russellville</td>
<td>165</td>
<td>7%</td>
</tr>
<tr>
<td>West Memphis</td>
<td>133</td>
<td>5%</td>
</tr>
<tr>
<td>Batesville</td>
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<td>6%</td>
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<td><strong>Total</strong></td>
<td><strong>2,433</strong></td>
<td></td>
</tr>
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</table>
Joseph Harrod  
Monticello, AR  

Joseph sustained a C-6 spinal cord injury in a motor vehicle crash in 2011. His first encounter with the Arkansas Spinal Cord Commission (ASCC) was when Joseph was referred to the agency. Joseph still remembers the visit he received from the ASCC intake coordinator.

War Eagle Boats in Monticello hired Joseph eight years ago as their purchasing agent responsible for materials management. Joseph made the decision to go back to work while still in ICU, it was his goal. Joseph says, while most didn’t believe he could Joseph worked hard to prove them wrong. It is sometimes a very hard task for those with disabilities to ready themselves for work, as it is for Joseph. His day starts early with his caregiver’s help and transporting him to the office. Even though it is frustrating at times because Joseph does not have full use of his hands and fingers, he maintains job invoices on the computer.

“Knowing that I am still very good at what I do even though I am physically disabled, it was rewarding to know that I could still make a difference. In the future I want to be an advocate for people like me who do not receive the state or federal assistance that they deserve. I have truly experienced this first hand,” Joseph Harrod.

Renisha Rivers  
Fayetteville, AR  

Fifteen years ago, Renisha Rivers was injured in a car crash resulting in a C6-C7 incomplete tetraplegia spinal cord injury.

Our staff came to the hospital to meet with Renisha and her parents, and that was the start of a lifelong friendship! She says, “The Spinal Cord Commission has been a beacon in the journey of my SCI and navigating me and my family through the system.” Renisha was in her first semester of college when she sustained her injury and was unsure of her career path. She returned to college and pursued her undergraduate degree in rehabilitation counseling at ATU and master’s degree from the University of Arkansas. When in graduate school, Renisha did her practicum with the Arkansas Spinal Cord Commission and was introduced to the Arkansas Rehabilitation Services (ARS) in Fayetteville, AR. Renisha completed her internship that later led to her employment with ARS where she has been employed for three years. Now Renisha strives to have a positive impact in others lives, and being a part of helping them achieve their goals.
Our Regional offices


ASCC Case Management

ASCC Regional office locations
ASCC operates ten regional offices located in major cities across Arkansas, serving 75 counties.

LITTLE ROCK (Central Arkansas Counties)
Counties: Conway, Faulkner, Lonoke, Perry, Pulaski, Saline, and White.
(501) 296-1792

FAYETTEVILLE (Northeast Region)
Counties: Benton, Carroll, Madison, and Washington County (excludes SW Washington county).
(479) 521-2903

BATESVILLE (Northern Region)
(870) 612-1656

JONESBORO (Northeast Region)
Counties: Clay, Craighead, Greene, Lawrence, Mississippi, Poinsett, and Randolph.
(870) 268-0425

WEST MEMPHIS (East Region)
Counties: Crittenden, Cross, Lee, Monroe, Phillips, Prairie, St. Francis, and Woodruff.
(870) 735-4725

PINE BLUFF (Southeast Region)
Counties: Arkansas, Chicot, Desha, Grant, Jefferson, and Lincoln.
(870) 534-2993

MAGNOLIA (Southern Region)
Counties: Ashley, Bradley, Calhoun, Clark, Cleveland, Columbia, Dallas, Drew, Hempstead, Howard, Lafayette, Little River, Miller, Nevada, Ouachita, Pike, Sevier, and Union.
(870) 234-6219

HOT SPRINGS (South Central Region)
Counties: Garland, Hot Spring, Montgomery, and Polk, includes Arkansas Career Training Institute.
(501) 701-6591

FORT SMITH (Western Region)
Counties: Crawford, Franklin, Scott, Sebastian, and Southwest Washington County.
(479) 452-6801

RUSSELLVILLE (Mid-West Region)
Counties: Boone, Logan, Johnson, Newton, Pope, Van Buren, and Yell.
(479) 890-5751

One brief moment in time can change a life forever.
The Commission and ASCC Executive Director provide governance oversight to the long-term development plan and are advocates on behalf of Arkansans with spinal cord disabilities for appropriate resources and support to realize continued services and programs for its clients.

The ASCC Commission is committed to advancing policies that lead to greater civil rights and independence for Arkansans with spinal cord disabilities. We believe the disability community must be part of the legislative dialogue when policies are created that impact the lives and well-being of the clients we serve.

We will continue to urge the Arkansas Legislation to do more to support ASCC and its need for additional staff to accommodate its mandated services and programs. To stimulate employment opportunities and improve income security for Arkansans with disabilities and to help us—help our clients to take a transformational approach to promoting self-sufficiency and independent living via meaningful work opportunities, income generation, asset-building and community integration and engagement.

Looking ahead

We intend to continue to increase operating efficiencies and strengthen our services and programs as we enter the 2014 year.

We would like to express our gratitude to our loyal supporters, clients, volunteers, sponsors, donors and our dedicated staff who make our continued success possible.
It takes every partner giving their best every day—to make a difference in the lives of Arkansans with spinal cord disabilities.
Connect to more
Information and resources.
Visit our website at:
www.spinalcord.ar.gov

Join us on Facebook

Little Rock Central Office:
(501) 296-1788 / (800) 459-1517
1501 North University Ave., Suite 470
Little rock, AR 72207