



Brain Injury Association of Virginia and Virginia Alliance of Brain Injury Service Providers

2025 Budget Support Statement

WORKFORCE RETENTION: \$985,000 included in House Budget

Delegate Rodney Willett, 314 #1h

WHY: State-contracted brain injury providers continue to report high attrition and difficulty filling open positions because of non-competitive salaries and benefits. When staff cannot be retained or hired due to low salaries, delivery of programs and services are impeded, which leads to the inability to meet client needs. Critical services can go unmet or are delayed.

- Starting salaries for brain injury case managers and Clubhouse staff are generally 10% to up to 20% less than starting salaries for similar positions in our DD and Behavioral Health safety net service systems.
- Community Service Board (CSB) employees receive regular cost of living raises in the state budget to coincide with state employees, but our workforce does not.
- State brain injury providers have received workforce retention increases only 3 of the last 20 years resulting in more than a 30% turnover rate this year.

STRENGTHEN SAFETY NET SERVICES: \$1.0 Million included in House Budget

Delegate David Reid, 314, #4h

WHY: Brain injury programs have waiting lists for services and struggle to meet existing demands from this challenging population that requires specialized support. Now that statewide services are possible, this strengthening would allow services to expand within the geographic service areas where it remains difficult to serve due to population, territory size, and other logistical challenges.

- In some rural localities, one case manager can serve up to 5 counties and be the only service personnel in that area.
- High density urban areas are also underserved. For instance, in Hampton Roads, the 2nd most populated area of the state, only 2 full time case managers serve this area.
- Additional clinical professional staff, including licensed counselors, rehab therapists and employment staff are needed to provide the appropriate milieu of services commonly available for other disability populations.