

VIRGINIA BRAIN INJURY COUNCIL MEETING

Meeting Minutes-FINAL

Friday, January 27, 2012 ♦ 1:00 p.m. - 4:00 p.m.

Members Present:

Jeffrey Barth, Ph.D.	University of Virginia School of Medicine
Gayl Brunk	Valley Associates for Independent Living
Jeff Carpenter	Survivor
Susan Elmore	Virginia Dept of Behavioral Health & Developmental Services
Lynn Forsyth	Family Member
Melissa Fox, DPT	University of Virginia Health System
Aaron Goldmann	Survivor, Commissioner's Designee
Patricia Goodall	Virginia Department of Rehabilitative Services
John Heath	TBI Federal Grant Volunteer Family Ombudsman
Katherine Lawson	Virginia Board for People with Disabilities
Anne McDonnell	Brain Injury Association of Virginia
Martha Mead	Virginia Wounded Warrior Program
Carole Norton, Ph.D. (Immediate Past Chair)	Mary Buckley Foundation
Cynthia O'Donoghue, Ph.D., CCC-SLP	James Madison University
Debbie Pfeiffer, Ed.D., CED	Virginia Department of Education
Jodi Power, RN, JD	Virginia Nursing Board
Mark Salisbury (Chair)	Family Member
Brian Shenal, Ph.D. (Vice-Chair)	Salem Veterans Administration Medical Center
Gerald Showalter, Psy.D.	Woodrow Wilson Rehabilitation Center
Barbara Seymour	Virginia Department of Medical Assistance Services
Jason Young (proxy for Michelle Witt)	Virginia Alliance of Brain Injury Service Providers
Leigh Wion (Secretary)	Virginia NeuroCare

Members Absent:

Heather Board	Virginia Department of Health
Cynthia Millican	Family Member
Michelle Nichols	Defense and Veterans Brain Injury Center
Paul Sharpe	Virginia Department of Health
Jeff Sherman	Virginia Department of Juvenile Justice
Julie Triplett	Virginia Office for Protection and Advocacy
Chuck Walsh	Middle Peninsula Community Services Board
Michelle Witt	Virginia Alliance for Brain Injury Service Providers

Others in Attendance:

Mary Margaret Cash	Virginia Department of Rehabilitative Services
Kristie Chamberlain (Staff)	Virginia Department of Rehabilitative Services
Kristy Joplin	Brain Injury Association of Virginia
Becky Lanier	Brain Injury Association of Virginia
Jennifer Reed	Survey Evaluation and Research Lab, VCU
James Rothrock	Virginia Department of Rehabilitative Services
Dena Schall	Virginia Department of Rehabilitative Services

Opening Protocol

The Virginia Brain Injury Council held a quarterly meeting at the Virginia Department of Rehabilitative Services Central Office at 8004 Franklin Farms Drive in Richmond, VA. Mark Salisbury, Chair of the Council at called the meeting to order at 1:07 p.m. Members and guests introduced themselves.

Approval of October 28, 2011 Meeting Minutes

Jodi Power made a motion to approve the minutes of the October 28, 2011 meeting as written; Carole Norton seconded. The motion passed unanimously.

Approval of January 27, 2012 Meeting Agenda

Cynthia O'Donohue, Ph.D. made a motion to approve the agenda and Anne McDonnell seconded. The motion passed unanimously.

Public Comment Period

The following announcements were made by Anne McDonnell:

1. Fran Rooker's mother passed away. Fran is the founder of the Jason Foundation in southwest Virginia.
2. Helen Butler, a previous Virginia Brain Injury Council member, has tendered her resignation as Executive Director from the Brain Injury Services of Southwest Virginia (BISSWVA). Ms. Butler will step down in March 2012 and the Board of Directors is recruiting a replacement.
3. Fred Esposito's wife, Evelyn Esposito, passed away this week. Evelyn Esposito was instrumental in starting the Brain Injury Association of Virginia (BIAV). There is a wake Friday, 1/27/12 in Richmond.
4. The Brain Injury Association of Virginia, Virginia Commonwealth University (VCU)'s Department of Physical Medicine and Rehabilitation and the VCU School of Social Work is hosting a Family Retreat Program for brain injury survivors who are parents. This is a research project, so families are asked to complete questionnaires about their family and later participate in a focus group. Families may earn up to \$100 to compensate them for their time and travel expenses. Families eligible to participate are those in which one of the parents has a brain injury and there are children in the home between the ages of 6 and 18. The parents do not have to be married, but should be living together as a family unit. For more information or to register, call Dr. Emilie Godwin at VCU at 804-828-3701.
5. The Brain Injury Association of Virginia Conference is Saturday, March 10, 2012 in Richmond. Brochures and scholarship information is available.

Presentation of Certificate

Commissioner Rothrock presented Jeff Carpenter, an At-Large member of the Virginia Brain Injury Council occupying a "survivor" role on the Council, with a certificate in recognition of his service to the Virginia Brain Injury Council over the last three years. Jeff's term on the Council ends in March 2012. Mark Salisbury, Chair, also thanked Jeff for his dedication to the Council and asked him to please join us at future meetings as a meeting guest.

Remarks from the Virginia Department of Rehabilitative Services: Commissioner Rothrock

1. The Commissioner encouraged the Chair of the Council to write a letter of appreciation on behalf of the Council to Evelyn Esposito's family. Mark Salisbury, Chair, requested that Staff work with him on drafting a letter to Frederic Esposito.
2. There are several items of interest from the General Assembly:
 - a. The Commonwealth of Virginia reached an agreement yesterday with the United States Department of Justice. The Commonwealth will be allocating \$2 billion over 10 years to close the state training centers and add Medicaid waiver slots with the goal of transitioning persons with development and intellectual disabilities from an institutional facility to community based services. People with brain injury will be impacted in some way by this decision but the details are still unfolding.
 - b. There are several items that address the Governor's initiative to re-organize and reform state government.
 - i. This has initiated a bill to create a new agency that would combine the Department of Rehabilitative Services, The Department of Aging, and The Department of Deaf & Hard of Hearing. The bill also transfers powers and duties related to the administration of auxiliary grants and provision of adult services and adult protective services from the Department of Social Services to the newly created department. (Senate Bill #678 and House Bill #1291) This legislation would put an infrastructure in place initially and then develop a plan to modify those programs impacted by the consolidation. No new department name has been agreed upon from the list of suggested names. The Commissioner envisions the opportunity for persons with disabilities to be privy to collaborative services not available with separate departments. This new department would not affect the way that local services that Social Services, Adult Protective Services, Area Agencies on Aging, and Centers for Independent Living are provided.
 - ii. Department Commissioners received a directive in September 2011 on balancing the Commonwealth's Budget. The Commissioner sought to protect core programs, programs with a match component, and vocational rehabilitation services. The Governor's budget included \$2.85M in this year's proposed budget and \$3.4M in the next year that will maximize the Commonwealth's capacity to draw down federal dollars. There are proposed cuts in secretarial

support and the \$155K, the Brain Injury Discretionary Services funds which date back to the Beyer Commission in the 1980s. With the increase in brain injury services to \$3.8M and changes in Medicaid, it is projected that there will not be needs left unmet. Community-based state funded contracted brain injury programs would be cut \$77K however, the Alliance of Brain Injury Service Providers and the Brain Injury Association of Virginia are advocating to have the \$77K restored.

c. Questions

- i. Jason Young, representing the Virginia Alliance of Brain Injury Service Providers asked if within the new agency the Virginia Brain Injury Council's ability to provide input into funding recommendations would change. Commissioner Rothrock replied that this requirement is in the budget language which has not changed so does not need to be addressed in the bill.
- ii. Jason Young referenced the mention of traumatic brain injury in the Department of Justice settlement and asked what role the Commissioner sees DRS taking in those discussions. Commissioner Rothrock responded that not all the plans have been formalized since the agreement was just signed yesterday. Secretary Hazel designated a point person and expects details to be forthcoming.
- iii. Anne McDonnell added that as these agencies merge, the needs of children are of concern. The Department of Rehabilitative Services is the lead agency for persons with brain injury and the Community Services Boards is the agency listed in the DOJ settlement.
- iv. Debbie Pfeiffer asked for clarification about the whether or not the Virginia Brain Injury Council would be directly or indirectly impacted by the executive order to condense the number of Advisory Boards. Staff responded that the Virginia Brain Injury Council is a requirement of the TBI Federal Grant so there are federal funds requiring the existence of a brain injury council in some form. Therefore, staff did not feel the Council would be impacted at this time.

New Business

Legislative Items of Interest

Jason Young, representing the Virginia Alliance of Brain Injury Service Providers, provided the Council with an update on budget amendments in this year's General Assembly session. Since October, the Governor's Budget has come forward with additional budget cuts which caused meetings with the House and Senate Budget Analysts recommending prioritizing the most critical needs. The Virginia Alliance of Brain Injury Service Providers (the Alliance) came to a decision to prioritize the immediate needs and request a \$600K appropriation in addition to the originally submitted \$6.5M appropriation request. At the beginning of the General Assembly session, the Disability Commission met and made the decision to introduce the \$6.5M appropriation request. Patrons of this amendment are Senator Puller and Delegate Orrock. Members of the Alliance and the Brain Injury Association of Virginia have had meetings with key members of the General Assembly and on 1/30/12 have the opportunity to present testimony to the HHR subcommittee. The Alliance met the morning of the Council meeting and came to consensus on how to respond to any confusion over the two budget amendments.

2012 LEGISLATIVE AGENDA FROM THE VIRGINIA ALLIANCE OF BRAIN INJURY SERVICE PROVIDERS: \$600,000 appropriation For the Virginia Department of Rehabilitative Services

Delegate Onzlee Ware – Budget Item 330 #8h

Senator Henry Marsh – Budget Item 330 #6s

1. Restore \$77,000 for brain injury services cut from the Governor's budget
2. Secure service delivery infrastructure and workforce of community based brain injury services, including adult and pediatric case management, clubhouses/day programs, and regional resource coordination
 - Services are funded at levels below minimums established by the General Assembly, and base funding for services has not increased in the face of rising costs.
 - More than 200 people are on wait lists for services, and wait lists exceed 2 years in some areas.
 - Opportunities for community living are limited without an available and qualified work force; lack of sufficient funds for salaries and benefits negatively impact *support and service options*.
3. Streamline and modernize case management data collection

- The current system is antiquated and ineffective, and the delay in bringing systems up to date is a result of stagnant funding for several years.
 - Current technology needs to be utilized to enhance program oversight by DRS, which was cited as an area for improvement in the 2007 Joint Legislative and Audit Review Commission (JLARC) study (Senate Document #15).
 - A computerized data collection system will improve efficiency and accuracy of documentation and service delivery reporting.
4. Conduct brain injury surveillance, outreach and technical assistance services
- The CDC estimates 28,000 Virginians are injured each year, not including veterans (who are counted through other surveillance mechanisms).
 - Patients are being discharged quicker and sicker from hospital settings with little or no follow up or education on their injuries or how to access services and supports, and are being relegated to a lifetime of poverty and disability.
 - Very little data exists on Virginians with brain injury, including veterans and wounded warriors, who need treatment, services and supports; monitoring and responding to injury trends and providing technical assistance will ensure deliberative and informed policy responses

Patti Goodall, Manager of the Brain Injury Services Coordination Unit emphasized that in addition to the \$77K in proposed funding cuts to state funded contracted brain injury service providers, the service providers stand to lose \$60K in awarded BIDS funds that are a part of their current contracts. Ms. Goodall pointed out that this was not a part of the revised budget amendment for \$600K and even if the \$77K is not cut, the \$60K would be cut if the BIDS fund was not saved.

The Brain Injury Association of Virginia (BIAV) and Alliance of Brain Injury Service Providers are hosting the annual Brain Injury Awareness Day at the General Assembly on Thursday, February 2, 2012. There will be a breakfast for the legislators and a staging room for those in attendance to receive directions and talking points for when speaking to legislators. Kristy Joplin, from the Brain Injury Association of Virginia, will send more information out in the next few days.

Mark Salisbury reminded Council members to act as an individual at the Brain Injury Awareness Day when advocating because Council members cannot advocate as a member of the Virginia Brain Injury Council.

Appointment of By-Laws Committee

Mark Salisbury led a discussion to appoint a By-Laws committee. The By Laws indicate that the Secretary of the Council will act as the Chair of the By-Laws committee. Therefore, Leigh Wion assumes the role as Chair of the By-Laws committee. The following members volunteered to serve on the committee: Jodi Power, Jeff Barth, Melissa Fox, Brian Shenal, and Mark Salisbury (ex-officio). Kristie Chamberlain as Staff to the Council will assist in coordinating a conference call prior to the next meeting so that the Committee can discuss proposed changes.

Request for Ideas for April Meeting Educational Item

Mark Salisbury facilitated a discussion to solicit ideas for an Educational Presentation at the April meeting. Patti Goodall shared that a 1 hour presentation on the VR Process was to be on the agenda for today but was postponed to possibly the April meeting.

The following is a list of suggestions generated by Council members:

- Vocational Rehabilitation Process
- DOJ settlement (suggested presenters are Heidi Lawson or Katherine, Office of Community Integration)
- Multiple concussions, CTE, new PET scan probe (suggested presenter is James Stone, UVA)
- Research of brain injury on marriage – (suggested presenter is someone from VCU Model Systems Programs)
- Follow up from Dr. Kudler's presentation at the 2011 Brain Injury Report Out Day. He is now director of Rural Health for the VA.
- The validity of neuropsych testing by telehealth (Suggested presenter Brian Shenal)
- A Day in the Life – brain injury survivor or family member. (Anne knows of a woman who is battling de-institutionalization. John Heath is available as a backup.)

The Council came to consensus that the current priority of interest is the DOJ settlement. Patti Goodall and Anne McDonnell volunteered to coordinate a presenter on the DOJ settlement. Patti offered that she will run the subject by the Commissioner for his input before making any next steps.

TBI Federal Grant Statewide Needs & Resources Assessment – *Patti Goodall and Anne McDonnell*

Patti Goodall and Anne McDonnell presented an update on the federal grant activity of a statewide needs and resources assessment that will be completed by the Survey Evaluation and Research Lab (SERL) of Virginia Commonwealth University from April 2012-March 2013. A member of the SERL research team attended the meeting to listen to the Council member's ideas for the survey. Members of the Council were provided with a copy of an assessment instrument to use as reference that the state of Idaho implemented. The Council was informed that the survey cannot be all things, but that DRS would like input on what key items should be addressed and SERL will make final decisions on what is realistic to include:

Council members discussed several suggestions of survey information that they feel would be helpful to know:

- Severity of Injury (especially for mild brain injury)
- Length of treatment
- Employment status (at a reduced level and the number of attempts at employment)
- Barriers to care (e.g. communication, transportation, lack of services in their area)
- Technology Access
- Addressing mental health issues explicitly and adding pain, poly-substance abuse, PTSD, and depression, suicidal thoughts
- Determining what term to use (e.g. brain injury, head injury, concussion, "hit to the head")
- Services received in the education system. Need for accommodation in school. Support services provided for parents of a child with a brain injury.
- Stratify survivors by age groups to determine need and barriers.
- Are there plans for the future? Inquire with caregivers about the future
- Soliciting input from licensed health care providers, athletic trainers, those that are homeless including those who do not present to shelters. (Commissioner Rothrock has already made contact with Dr. Remley, State Health Commissioner)
- Availability of other administration methods if using the telephone is a barrier.

The project is the Department of Rehabilitative Service's TBI Federal Grant activity and will hopefully be funded by the Commonwealth Neurotrauma Initiative (CNI) Trust Fund Advisory Board as cash match to the federal grant for year four of the federal grant. Patti Goodall shared that the CNI Trust Fund Advisory Board has not officially voted that funding will be available for this project and will review the request at the March 9, 2012 meeting.

The contract end date for TBI Federal Grant is March 2013 but if needed the Federal Grant can get a 90 day "no cost" extension to wrap up activities.

Unfinished Business

Nominations and Elections Committee

Cynthia O'Donoghue reported as the Chair of the Nominations and Elections Committee that the Committee met via conference call on January 4, 2012 to fill two at-large vacancies in the survivor category. After review of the nominations (the Council received four total nominations for the two opening positions) and discussion, the committee came to consensus on a slate. The individual in bold is the committee's top recommendation for each open position. Dr. O'Donoghue pointed out that Scott LaPoint being named twice as a secondary is not an error.

Position One: ***John Butrick (Smithfield)** and Scott LaPoint (Virginia Beach)

and

Position Two: ***Ted Taylor (Richmond)** and Scott LaPoint (Virginia Beach)

Brian Shenal made the motion to approve the slate as is. The motion was seconded by Jeff Barth. The motion was passed unanimously.

Mark Salisbury thanked the committee for their work. Staff will now take the slate to the Commissioner for final appointment.

Closing Protocol

Mark Salisbury reviewed important information on the upcoming meetings.

- There will be New Member Orientation at the April 27, 2012 meeting beginning at 11 am. Please contact Kristie Chamberlain if you are a current Council member who would like a refresher.
- There is no State Report Out Day this year coinciding with the July 27, 2012 meeting.
- The October 26, 2012 meeting will be held at Woodrow Wilson Rehabilitation Center in Fishersville, VA

Cynthia O'Donoghue, Ph.D. announced that she was asked to co-present at the International Brain Injury Association's World Congress in Edinburgh, Scotland in March on the Community Based Crisis Intervention grant research that is awarded to Crossroads to Brain Injury Recovery from the Commonwealth Neurotrauma Initiative (CNI) Trust Fund in 2009. Currently they are trying to secure funding for registration and travel.

Katherine Lawson of the Virginia Board for People with Disabilities announced an upcoming webinar on voting access and helping people go to work with personal care attendants. She also announced a self-advocacy group looking for members -Virginia Advocates United Leading Together (VAULT) under the direction of Shawn Kirk.

www.virginiavault.org

Melissa Fox made a motion to adjourn the meeting. Mark Salisbury adjourned the meeting at 3:55 p.m.

Department of Rehabilitative Services (DRS)
Federal Traumatic Brain Injury Grant Report: “Closing the Gap”
Virginia Brain Injury Council (VBIC)
Friday January 27, 2012

QUARTERLY HIGHLIGHTS:

- DRS submitted a request to The United States Department of Health and Human Services’ Health Resources and Services Administration (HRSA) to *carryover funds* from Year Two to Year Three for (approximately \$65,000) to continue previous proposed carryover projects. It was approved on December 22, 2011.
- **DRS’ Federal Grant Continuation Progress Report** – a mandatory “progress report” to the Federal Office – was submitted December 31, 2011 (prior to deadline).
- **Turning Point:** Several departments at DRS (TBI Federal Grant, Policy and Planning, Community Based Services, and Training) and Subcontractor BIAV have investigated and purchased a product called Turning Point (Video Polling Device). This interactive technology will bring many benefits to meetings, presentations, conferences, evaluations, and data analysis. These departments and BIAV are sharing the use and cost of this device. The product will also include accessibility features such as braille response cards and smart phone capabilities. We will have 2 receivers, unlimited software downloads, carrying cases, 1 year technical assistance, 1 year warranty, and 100 response cards (5 in braille). Smart phone licenses can be rented for \$2 a day when needed.

ONGOING:

- **BIAV/Federal Grant Military Brochure:** BIAV is lead on the development of a “referral” brochure for Virginia veterans. Information on how to access resources through DRS, BIAV, Virginia Wounded Warrior Program, and Defense Veterans and Brain Injury Center will be included.
- **Virginia’s Needs and Resources Assessment:** DRS and BIAV have met with Virginia Commonwealth University Survey Evaluation & Research Laboratory (SERL) in December 2011 and have initiated discussions on the Year 4 Federal Grant goal to conduct a statewide assessment of brain injury needs / resources. Anne McDonnell and Patti Goodall will present a short overview to the Council on the guidance document that will be given to SERL at the January 27, 2012 meeting. We request any suggestions be sent to Patti Goodall at Patti.Goodall@DRS.Virginia.gov. All suggestions will be taken into consideration but may not necessarily be included in the final product.
- **Virginia Department of Health Professions:** DRS and BIAV are sending out a mailing this month to approximately 2,800 Licensed Psychologists (Applied, Clinical, and School). The mailing will include a cover letter on DRS letterhead, DRS services resource flyer, BIAV brochure, and BIAV March 2012 Conference flyer.
- **Nursing Home Intervention Project:** DRS Federal Grant staff will be meeting in February 2012 to discuss the Request For Proposals (RFP) process to solicit a vendor to carry out the activities of this project.
- **Virginia Collaborative Policy Summit on Brain Injury and Juvenile Justice:** DRS and BIAV, along with collaborating partners will be hosting a two-day Policy Summit on Brain Injury and Juvenile Justice in Richmond, Virginia in June 2012. This national meeting will bring together HRSA staff, leading researchers, state agency stakeholders, and advocacy professionals from Virginia, Texas, Nebraska, Utah, and Minnesota, all states currently studying this population. This summit will provide a unique opportunity for attendees to discuss each state’s policies and practices for identification, diagnosis, and treatment, as well as their successes, challenges, and results to date. Concluding the event will be a discussion of policy recommendations with elected and appointed policymakers, including several members of the Virginia General Assembly. A summary document describing challenges, discussions, plans, and recommendations will be prepared and disseminated after the meeting.

Subcontractors Brain Injury Association of Virginia and Virginia Commonwealth University will present updates on their Federal TBI Grant activities in separate reports

“Closing the GAP” BIAV Grant Report
Year 3 – 3rd Quarter

Target Group #1: Juveniles with brain injury committed to the Virginia Department of Juvenile Justice

Data Collection

- DJJ staff continuing to screen youth admitted to the facilities.

Education

- Received feedback on draft materials; began investigation of and spoke w/ DJJ staff about incorporating brain injury educational videos into staff meetings.

Targeted Group #2: Persons with Low Socioeconomic Resources

Systems Change

- DMAS workgroup meetings cancelled due to staffing changes; group will reconvene after General Assembly session.

Data Collection

- Provided I&R to 260 individuals (201 survivors/family; 59 professionals); barriers indicative of LSES were reported 64 times; 23 reported being a member of a minority population.
- Exploring options for further data-mining of VSTR information.

Education

- VSTR mailing sent to 137 individuals; received response from 22 individuals.

Targeted Area: Infrastructure Expansion

Systems Change

- Submitted project information on the Needs & Resources Assessment to staff at SERL

Education

- Website: Total visits 5,216; Unique visits 4,359; Page Views 10,405; Docs downloaded 1,337.
- Newsletter: 1,171 mailed
- E-Newsletter: 157 e-mailed
- Facebook: 9 educational posts

Outreach

- Filled vacant Family Ombudsman position
- Military brochure in production.



VIRGINIA ALLIANCE OF BRAIN INJURY SERVICES PROVIDERS

2012 LEGISLATIVE AGENDA

\$600,000 APPROPRIATION FOR DEPARTMENT OF REHABILITATIVE SERVICES

Delegate Onzlee Ware – Budget Item 330 #8h

Senator Henry Marsh – Budget Item 330 #6s

- 5. Restore \$77,000 for brain injury services cut from the Governor's budget**
- 6. Secure service delivery infrastructure and workforce of community based brain injury services, including adult and pediatric case management, clubhouses/day programs, and regional resource coordination**
 - *Services are funded at levels below minimums established by the General Assembly, and base funding for services has not increased in the face of rising costs.*
 - *More than 200 people are on wait lists for services, and wait lists exceed 2 years in some areas.*
 - *Opportunities for community living are limited without an available and qualified work force; lack of sufficient funds for salaries and benefits negatively impact support and service options.*
- 7. Streamline and modernize case management data collection**
 - *The current system is antiquated and ineffective, and the delay in bringing systems up to date is a result of stagnant funding for several years.*
 - *Current technology needs to be utilized to enhance program oversight by DRS, which was cited as an area for improvement in the 2007 Joint Legislative and Audit Review Commission (JLARC) study (Senate Document #15).*
 - *A computerized data collection system will improve efficiency and accuracy of documentation and service delivery reporting.*
- 8. Conduct brain injury surveillance, outreach and technical assistance services**
 - *The CDC estimates 28,000 Virginians are injured each year, not including veterans (who are counted through other surveillance mechanisms).*
 - *Patients are being discharged quicker and sicker from hospital settings with little or no follow up or education on their injuries or how to access services and supports, and are being relegated to a lifetime of poverty and disability.*
 - *Very little data exists on Virginians with brain injury, including veterans and wounded warriors, who need treatment, services and supports; monitoring and responding to injury trends and providing technical assistance will ensure deliberative and informed policy responses*

Regardless of a settlement with the Department of Justice, the Administration is committed to moving forward to ensure that individuals with disabilities, who want the opportunity to live in the community, have the supports and services to do so.

From presentation by Keith Hare to the Disability Commission, September 20, 2011