

North Dakota Brain Injury Advisory Council Videoconference (online)

July 11, 2022 Special Meeting Minutes

BIAC Voting Members Present: Nan Kennelly, Chair; Sarah Ring, Vice Chair; Shannon Cook; Rep. Clayton Fegley; Skipp Miller; Jessica Siefken

BIAC Non-voting Members Present: Denise Harvey, ND Protection & Advocacy, Secretary; Haley Lang, ND Dept. Public Instruction

Presenters/Guests: Jill Ferrington, National Association of State Head Injury Administrators (NASHIA); Rebecca Quinn, ND Brain Injury Network (NDBIN)

Facilitators: Ann Crews Melton and Caitlin McDonald, Consensus Council

Call to Order and Welcome: Chair Nan Kennelly called the meeting to order at 12:02 PM CT and welcomed members and guests.

Introductions. BIAC members introduced themselves. Responses to "What is one service you wish were available for individuals with brain injury?" included:

- More residential-type homes for individuals with staff trained in brain injury
- Current services available are like a dentist—you know it's there, but you don't really
 talk about it. It's like a hidden gem nobody really talks about. Having services more
 easily pop up somewhere would be my wish.
- Treatments like hyperbaric oxygen therapy and other treatments—if you talk to people, they don't know much about it. Treatments are so expensive, insurance doesn't always cover it. Trying different things is a challenge.
- Would like survivors to have a period of time where they have no brain injury. Where they can spend a day or a week without having to deal with what they have to deal with. Wish for them to be able to feel normal, to feel like it's not there anymore.
- Mental health services specialized for people with brain injury. If there are memory issues, tools for how to remember some of the skills taught in counseling sessions.
- Survivor with head injuries, aphasia: Services are very costly for some of us who don't
 have extra income. In Williston, we're isolated from resources and contacts—all of my
 contacts are in Grand Forks and Minnesota. Looking for a job through Job Service, but
 staff didn't understand my communication. For people with head injuries who want to
 get back to work to be self-sufficient, to be as independent as they used to be, Job
 Service isn't able to refer survivors, and there was nobody there who knew how to help.
- Wishing for more employment opportunities for people with brain injury, and more services out in western North Dakota.
- Wish there were more pre-service teacher resources or knowledge, for teachers coming out of school to be educated about brain injuries.

- Increased awareness of what is available, and the ability to connect with individuals with brain injury more easily. It breaks my heart when I hear from individuals, "I didn't know you existed, I didn't know there was someone to help us out." To help them know they're not alone.
- I wish there was a really strong brain injury—informed workforce helping people with brain injury go to work. This would help people afford services and improve their quality of life, and help survivors feel a little bit more normal.
- Better marketing and awareness of available current services.
- Day treatment program like in some other states—go all day for inclusive treatment with multiple therapies, integrated into the community recovery and rehab. We are always looking for mental health professionals that have BI experience. Sometimes mental health providers give advice that is counterproductive for helping individuals with BI if they're not trained/familiar.

May 20 Post-meeting Survey Results. Members reviewed the May 20 post-meeting survey results (attached). Some members commented they like the verbal reports during the quarterly meetings. One option could be to submit written reports prior to meetings, and prioritize items that need committee input for discussion. Place items that aren't priority at the end of the agenda. Members like having people with brain injury speak first.

A survivor commented it is helpful to send meeting materials out well in advance, to allow enough time to review. Another member suggested implementing a consent agenda for informational items, and moving agency reports toward the end of the meeting. Currently there is only a standing Strategic Planning subcommittee, but in time, there will be more committees reporting. Jill will note these comments and build recommendations into the Council toolkit.

Needs Assessment, Council Member Matrix/Survey, Toolkit Development. Jill Ferrington, National Association of State Head Injury Administrators, presented a PowerPoint with needs assessment highlights from 2005 and 2016 and toolkit updates (attached). She offered survey overview for the Council member background/skills matrix. She will update the Council Member Roster with photos and bios for all members; this information will be public. Contact Jill if you'd like assistance filling out the survey, or need help crafting a bio: jferrington@nashia.org.

Discuss In-person/Virtual Meetings. Members discussed preferences for encouraging attendance in person at an upcoming meeting. The quarterly meetings have both in-person and virtual attendance options available, but members have defaulted to attending only virtually since the pandemic began. Members raised concerns about travel reimbursement—currently state employees and survivors and family members can be reimbursed for BIAC meeting travel, but service providers are excluded. Ann will ask Tami Conrad for clarification on eligible expenses/amounts for reimbursement. The Council may consider adding reimbursement for all members to upcoming legislation. Ann will add a poll for in-person vs. virtual preferences to the next post-meeting survey, and include reimbursement information.

Upcoming Meetings. The next quarterly BIAC meeting is Friday, Aug. 26, 1-4 PM CT, in-person and virtual options. The next BIAC Special Meeting is Monday, Oct. 17, 12-1 PM CT via Zoom.

Adjournment. Nan adjourned the meeting at 1:05 PM CT.

Respectfully submitted, Ann Crews Melton Consensus Council



ND Brain Injury Advisory Council Special Meeting

Monday, July 11, 2022 12:00 PM – 1:00 PM CT Videoconference*

BIAC Materials: https://drive.google.com/drive/folders/1 fMizcTfB8xrvejHLbEgB7uLlFBac5Ao

AGENDA

12:00 PM Call Meeting to Order: Nan Kennelly, Chair

Welcome & Introductions

Check in (two part):

- 1. There are now 25 hours in a day. How do you spend the extra hour?
- 2. What is one service you wish were available for individuals with brain injury?

May 20 Post-meeting Survey Results

Needs Assessment: Jill Ferrington, National Association of State Head Injury

Administrators

Council Member Profile/Survey: Jill Ferrington

Council Toolkit Development: Jill Ferrington

Discuss In-person/Virtual Meetings

Next Steps

1:00 PM Adjournment

Upcoming Meetings

BIAC Strategic Planning Subcommittee: July 18, 2022, 12:00 – 1:00

PM CT

BIAC Quarterly Meeting: August 26, 2022, 1:00 – 4:00 PM CT **BIAC Special Meeting**: October 17, 2022, 12:00 – 1:00 PM CT

North Dakota Brain Injury Advisory Council May 2022 Post-Meeting Survey Responses

1. I felt engaged at the BIAC meeting.



- 2. Was there anything you especially valued about the BIAC meeting that should be continued?
 - Loved getting to know everyone with intros as well.
 - personal experience. I like Jill's leadership in adding structure and consistency to the council so we can be more effective
 - personal stories
 - Participants seem really interested in the work
 - Time for persons with a brain injury to speak during the meeting.
- 3. Was there anything about the BIAC meeting you would suggest changing in the future?
 - Continued intros at the beginning w/ ice breakers or questions re: TBI.
 - prioritize items that need Committee Input. If the item does not require Committee discussion, send info out about the item ahead of the meeting for Committee review, give a brief summary of the item at the meeting, ask for questions, and move on.
 - Not at this time.
- 4. Are you interested in participating in the ND Brain Injury Network's survivor engagement group (which will plan and assist with outreach/training, a speaker's bureau, and a new, self-advocacy-focused curriculum for people with brain injury)?

Yes: Nan Kennelly

Maybe, I'd like to learn more: Bobbiann Froemke, Skipp Miller

5. Are you interested in attending the National Association of State Head Injury Administrators State of the States in Head Injury Conference (fully virtual) September 7-9, 2022?

Yes: Bobbiann Froemke, Nan Kennelly, Barb Burghart, Denise Harvey

6. Additional comments?

- Thank you for the opportunity to share my TBI story. People were so kind in their feedback.
- For #5, I might be interested in attending the National Association of State Head Injury
 Administrators State of States in Head Injury Conference. The follow up notes that were shared
 helped quite a bit since I was not able to attend. I sure do like the suggestions of ND Protection
 & Advocacy Project and the upcoming How to Support The Right To Choose for Persons with
 Disabilities.
- good to see you reach out to members to measure engagement



ND Board and State Plan Development Special Meeting

Jill Ferrington, MS, CRC, CBIS jferrington@nashia.org

1

Refresher — Board Development and State Planning Process

Board Development – over the next 9 months:

- Examine Advisory Council best practices
- Recommend and guide Advisory Council on implementing best practices (e.g. mentorship, council member roles, etc.)
- Develop Advisory Council Orientation Toolkit
- Train on Person-Centered Practices



Refresher — Board Development and State Planning Process

State Plan Development – over the next 12 months:

- · Review of past needs assessments
- Examine priorities of current Advisory Council members
- Assist Strategic Planning Sub-Committee (SP) in the development of a DRAFT five-year State Plan with specific goals and objectives
- Guide process of gathering public input on DRAFT State Plan
- Finalize State Plan with Advisory Council no later than July 2023



2

What we've accomplished...

- Review of membership requirements crosswalk preliminary plans for legislative action
- Determined components of BIAC toolkit
- Broadened board member profile matrix
- Continued post-meeting surveys
- Getting to know one another!



Today's Focus

- Council Member Profile/Survey
- Council Toolkit Development
- Needs Assessment
- Discuss In-person/Virtual Meetings



Board Member Roster

North Dakota Brain Injury Council

During the last legislative session, the North Dakota Brain Injury Governor appointed Council was developed. Since session, applications were received and an official council was formed with wonderful members who are working together to determine what future of brain injury services and support look like for individuals in North Dakota. The council consists of representatives from across the state:

- Lisa Anderson, Vice-Chair Family Member
 Sharman Plantedt, Saminan Dialeirana and
- Shannon Binstock Survivor, Dickinson area
 Austyn Klochn Service Provider, Community Options which has offices in all 8 regions acros North Dakota.
- Dr. David Biberdorf General Member, Dr. Biberdorf is an Optometrist who specializes in vision after brain injury in Grand Forks.
- ReHab Visions in Diskinson.
- Sanford in Fargo.
- Senator Ralph Kilzer Senate Appointment
- Skipp Miller Indian Affairs
 Nikki Brunelle North Dakota Department
- Health Trauma and Emergency
 Cheryl Hess-Anderson North Dakota
 Department of Human Services Vocational
- Kevin McDonough North Dakota Department Public Instruction
- Denise Harvey North Dakota Protection and

 Advances:
- Mandy Slag North Dakota Department of Health
 Initial Proposition



in November of 2017. She serves as an Open Member on the council. Nan has worked in the field of brain injury rehabilitation for 24 years. She specializes in treatment of cognitive-communication concussion, brain injury, stroke call illness. She has a specific nent of executive functioning mult traumatic brain injury. Nan

interest in the inclusional of coccasion eliminating in sources related to mild transmitte brain injury. Nam sources that the confidence of the speech Pathologies and the Pathologies of the speech pathologies sources are present to the speech confidence to the speech of the speech confidence to the speech of the speech confidence to the speech confidence the speech confidence providence that the speech confidence providence that the speech confidence providence providen

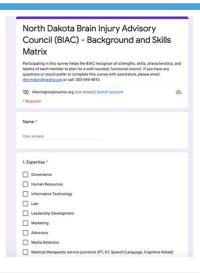


Lisa Anderson was elected as Vice-Chair in November of 2017. Lisa represents the Family Member on the Advisory Council. Lisa is a farm wife, mother and caregiver to her daughter who is a brain injury survivor. Her daughter sustained a traumatic

Since this time, Lisa has been actively involved in testifying before the ND legislature to enhance services for brain injury survivors, as well as create awareness to the challenges and difficulties that brain



Board Profile



A chance to learn about all board member skills, areas of knowledge, expertise, and background



7

Toolkit Outline

Welcome to the North Dakota BIAC

Acronyms List ND BIAC Bylaws

Member Roster

Person-Centered Profiles

Member Template and Profile

Council Profile Template

Council History and Vision

Needs and Resources Assessment

State and National Resources

Full Participation Guidelines and Accommodations Checklist

Role descriptions (e.g. member, service provider, & agency reporting updates)
Robert's Rules of Order - Summary
North Dakota - Open Records and

Meetings

Organizational Charts

Administration for Community Living North Dakota State Government

Legislation and Funding

Federal Statutes

State Statutes

TBI Grant Overview





Needs Assessment (2016)

Services

- lack of a continuum of resources, supports, and services
- disparities across the state
- · access to services (complicated by brain injury daily functioning)
- · care coordination across existing programs
- family and survivor support systems
- transitional services, case management, employment supports, and transitional housing
- access to treatment for brain injury, especially after hospitalization

Education and Training

- general public
- workforce

Data

- common definitions
- data collection system coordination



9

Needs Assessment (2005)

- shortage of TBI advocates
- no central source of information or resources,
- lack of knowledge by individuals about TBI services,
- inadequate financial resources
- lack of individualized services
- overall lack of understanding of TBI by service provider



Perspective of Needs - current board

- Education/awareness
 - in school setting

 - o path to services
 o recognition of hidden brain injury
 o uniquenesses of brain injury
 o awareness of concussion as a mild brain injury
- Services and support
 - individualized
 - for people with all brain injury
 - non-Medicaid recipients
- Elevate voices and increase engagement of people with brain
- Prevention
- **Providers**
- Hyperbaric Oxygen Treatment



11

Upcoming...

- August business meeting (remote or in-person?)
- Post-meeting survey
- Toolkit
- Training on Person Contared Practices

Next Business Meeting: Friday, August 26th 1pm



