

BRAIN INJURY ADVISORY COUNCIL (BIAC)

Date: March 10, 2021 Time: 9:30 am - 11:45 am Location: Web-conference

TYPE OF MEETING	Quarterly Meeting			
FACILITATOR	David Forsythe, Ch	airperson		
ATTENDEES				
NAME	PRESENT	NAME	PRESENT	
Voting Council Members		Non-Voting Council Members		GUESTS
David Forsythe	\boxtimes	Alan Dellapenna	\boxtimes	Beth Overby
Beth Lilyquist	\boxtimes	Amy Douglas		Janice White
Carol Ornitz	\boxtimes	Cindy DePorter		Jesska Brown
Christine Fernandini	\boxtimes	Dreama McCoy		Karin Reuter-Rice
Daniel Pietrzak	\boxtimes	Michiele Elliott	\boxtimes	Lauren Costello
Diane Westbrook		Kenneth Bausell	\boxtimes	Lynnette Gordon
Erica Davis	\boxtimes	Lisa DeCiantis	\boxtimes	Michael Lennon
Geana Welter		Marica Gibson		Sandie Worthington
Jerome Frederick		Talley Wells		Sara Wilson
John Dickerhoff		Tracy Buchanan	\boxtimes	
Jordan Slade				
Karen McCulloch				
Laurie Leach				
Laurie Stickney	\boxtimes			
Lynn Makor	\boxtimes			
Martin Foil				
Melinda Munden	\boxtimes	Staff to Council		
Pier Protz	\boxtimes	Michael Brown	\boxtimes	
Rosanne Randell	\boxtimes	Sandy Pendergraft	\boxtimes	
Dr. Ryan Lamb		Scott Pokorny	\boxtimes	
Sarah Stroud		Stephanie Jones	\boxtimes	
Thomas Henson, Jr	\boxtimes			
Todd Bennett	\boxtimes			
Virginia Knowlton-Marcus	\boxtimes			

1. Agenda topic: Welcome, Review of Minutes & Introductions David Forsythe

Discussion	David Forsythe, chair, welcomed everyone to meeting. Mr. Forsythe advised members that there would be a vote for the committee chair position at the end of the meeting. He also acknowledged and thanked each current BIAC committee chair.		
Conclusions			
Action Items		Person(s) Responsible	Deadline

2. Seat and Appointment Vacancies

Scott Pokorny

2. Seat and Ap	intment vacancies	Scott Pokorny		
 Scott Pokorny provided the following updates regarding BIAC seat and appointments vacancies. MD four with expertise in trauma, nerves surgery, neuropsychology, PM& R or Emergency medicine. The Speaker of House have applicants for the seat and will be introducing a bill the legislatures to fill position. Representative of Veterans Affairs Rep. Of Office of Emergency Medical Services. A Representative of the NC Hospital Assoc. or other organization interested in brain injury prevention & treatment. Todd Bennett is expected to be reappointed for the seat. Family Member of person with Brain Injury (Western, NC). Chair and Vice Council chair for full council - DMH/DD/SAS are unable to serve in the roles Chair and Vice-Chair for Service Delivery System Committee – An IDD Consumer which means the person must be a consumer of IDD Services. Keep in mind that except for TBI, the intellectual/developmental disability must have been manifested before the person attained the age of 22. Names of two potential candidates have been submitted for the vacancy for the DD Consumer veteran, who has a TBI, could potentially qualify for this vacancy as well. This is a great opportunity to put forth the name of an interested individual with TBI for consideration. 				
Conclusions •				
Action Items				

3. Agenda topic: TBI Grant Survey

Stephanie Jones

Stephanie Jones shared the following information regarding the TBI Grant survey:

The purpose of the survey was to solicit stakeholder's feedback regarding potential grant focus areas to consider in the upcoming application for the Administration of Community Living (ACL) TBI Grant Funding Opportunity Announcement (FOA). The FOA has not yet been posted but is anticipated at any time. The survey consisted of 8 questions with Thirty-three (33) individuals responded. The survey was posted publicly for approximately four weeks. The documented results included with the agenda represents majority responses to the survey questions.

• Question 1- What portion of previous TBI grants have had the MOST impact for the NC TBI community?

Screening and Resource Facilitation

Education and Training

 Question 2- What portion of previous TBI grants have had the LEAST impact for the NC TBI community?

Screening

Employment opportunities

- Question 3- Rate topics in order of importance
- 1st- Behavioral Health (Mental Health and SUD)
- 2nd Employment
- 3rd Criminal Justice
- 4th Homeless
- 5th Underserved

Question 4- Rate areas in order of importance

- 1st Education and Training
- 2nd Resource Access and Engagement
- 3rd Information and Referral
- 4th Collaboration and Development
- 5th Resource Facilitation

Question 5- What should the primary emphasis of the grant be on?

Respondents overwhelmingly think the primary emphasis should be on specific topic areas (as opposed to specific populations).

- Question 6- Given the limited funding, what is the most important grant focus? Respondents overwhelmingly think primary emphasis should be on a few specific areas exclusively with a goal of having a significant positive impact/improvement in those few areas (as opposed to minimal impact statewide).
 - Question 7- Should the grant include a pilot initiative if possible?

Respondents overwhelmingly think there should be a pilot program.

• Question 8- Any other feedback regarding the TBI grant proposal Below are some of the general comments provided.

- Goals/deliverables for the grant proposal should align with the State Strategic Plan & BIANC Strategic Plan.
- Not just screening and training separately Form a partnership that includes training,
 Technical Assistance, resource referral, and screening, with objective outcomes and action
 steps (also looking at child abuse as a potential population given its evidence for future
 criminal justice interaction). Choose three populations (homelessness, child abuse, domestic
 violence), find one community partner in the state, and facilitate the efforts systematically.
- A critical need for the development of expertise for TBI Programming on all levels (medical, behavioral and community based but lack economic stimulation to parallel initiatives makes it difficult see substantive progress.
- NC warehouses too many people in facilities where they do not receive appropriate supports.
 Next initiative must target getting people with TBI out of facilities and into the community with services, with a focus on people of color with low incomes and other marginalized populations.
- Need long term residential and neurobehavioral programs for when caregivers are no longer able to provide care
- A complete summary of survey results can be found at:

https://forms.office.com/Pages/AnalysisPage.aspx?id=3IF2etC5mkSFw-zCbNftGbNd50x-lsJEkRtoMnPxigNUNFNDQko1OUpEMEZDSENNN0NCOUczT1BSNy4u&AnalyzerToken=p24i1qRsz2Hx1ksRmngWOsdRyhh1tTAz

Conclusions

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Conclusions	•		
Action Items		Person(s) Responsible	Deadline

4. Agenda topic: BIANC Update

Daniel Pietrzak

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Daniel Pietrzak provided the following updates regarding NCBIAC updates:

- March 3, 2021 Congressional Brain Injury Awareness Day NC BIAC staff was granted the opportunity to speak with several representatives, including Senator Byrd office, Senator Tillis office and Senator Butterfield office. The following requests were made during the discussions:
 - Increase that number, the number of dollars, so that all 50 states would be able to receive some type of money.
 - Additional funding for wounded warriors, making sure that that population is taken care of and represented.

6. Agenda topic: NC Brain Injury Association 2020 Legislative Report

Jan White

o. Agenda topic. No	. Agenda topic: NC brain Injury Association 2020 Legislative Report		
Discussion	Jan White provided the following updates regarding the NC Brain Injury Association	on 2020	
	Legislative report:		
	2020s report has been kept in the same format as years ago, due to lack of t	iming. Reports,	
	graphs, and charts should be included in the upcoming report.		
	An executive summary is placed at the beginning of the report. –		
	The introduction is composed of TBI in general, CDC information and information.	ntion regarding	
	the Division of Public Health Special Emphasis Report, 2018 and data.		
	Provided a history of the Advisory Council paper		
	Provided information regarding the development of the TBI State Plan		

- Provided information regarding HRSA
- History of the TBI Waiver Collaboration with Alliance LME and information provided regarding an expansion to at least one other catchment area, and that will be a five year expansion
- Provided information regarding the various BIAC committees' initiatives
- Provided information regarding federal TBI grants
- Request section
 - Public Policy Committee recommended a request from legislatures for a one million dollars increase in funding.
 - o Request for a budget for the Advisory Council for an Executive Director position
- Monitoring activities of Medicaid Transformation
- Provided information regarding the number of individuals that need service each year and then the number of individuals that get service each year.
- Barriers Eligibility process challenges with not meeting the income requirements. Also, the inability to locate medical records.
- In the conclusion, an acknowledgment of TBI at the state level. DHHS is increasing their identification of TBI as a distinct disability group, a significant gap in funding and limited TBI specific services, strengthening existing TBI service systems while creating additional service sectors to provide for the continuum of care. This population will not only help provide healthy, safe, and appropriate care settings, but will likely be a cost savings to the state in the long-term TBI in program planning efforts. However, there's a significant gap in funding and limited TBI specific services, strengthening existing TBI service systems while creating additional service sectors to provide for the continuum of care.
- Once the changes are incorporated into the report, Jan will seek the committee's vote and disseminate the plan to the Speaker of House.

Conclusions

Action Items	Person(s) Responsible	Deadline
Discussions regarding additions to the report included the following:		
Should small paragraph be included under Community Cased waiver for brain		
injury, and take the carpool highlighted part out of the state fund section?		
 An increased need for resource facilitation to help all people statewide with 		
brain injury		
 PDI fund, provide housing, other type of support that aren't available through 		
Medicaid		
Add a piece regarding the Brain Injury Association and that they have been		
primarily responsible for training and that in order to do that, there may need		
to be other funding explored		

Information regarding prison and homelessness	

7. Agenda topic: Adjourn

7. Agenda topic. At	ajourn			
Discussion	 David Forsythe adjourned the meeting at 12:00 p.m. and included instructions for joining the next scheduled meeting, So there's a TBI. Members of the council thanked David Forsyth for serving in council's chair role. 			
Conclusions	Pier Protz accepted the Vice Chair to Council seat.			
Action Items		Person(s) Responsible	Deadline	
Next meeting scheduled for 6/9/21 from 9:00a.m 1:30p.m. p.m. virtually (national speaker presentation from 12:00p.m1:30 p.m.).				

Respectfully submitted: Stephanie Jones, Michael Brown and Scott Pokorny.,