



**Brain Injury Advisory Council Meeting
Online via ZOOM
March 12, 2021**

MEETING MINUTES

Public notice of upcoming meetings will be available on the Department of Education website under “conferences & meetings” at least 10 days prior to each meeting.

MEMBERS PRESENT: Tiffany Armstrong, Emaly Ball, Jerry Bryan, Penny Clark, Ashley Davis, Tania Diaz, Joni Dulaney, Jo Gunderson, Randall Jones, Carla Lasley, Brooke Murtaugh, Judy Nichelson, Peg Ogea-Ginsburg, Zoe Olson, Jennifer Perkins (substitute for Karen Houseman), Peggy Reisher, Larry Roos, Shawna Thompson, Frank Velinsky

MEMBERS ABSENT: Tim Burton, Cindy Hoffschneider, Dale Johannes, Amy Levering

STAFF PRESENT: Keri Bennett, Ashley Hernandez, Nancy Noha

VISITORS: Andrew Ngochoch, Will Schmeackle, Chris Stewart

The meeting of the Nebraska Brain Injury Advisory Council commenced at 10:03a.m. Public notification of this meeting was made on the Nebraska Department of Education website.

ATTENDANCE

Council roll call was conducted, and introductions were made.

APPROVAL OF DECEMBER MEETING MINUTES

The minutes from December 4, 2020 were reviewed. A motion was made by Zoe Olson and seconded by Frank Velinsky to approve the December 4, 2020 meeting minutes as submitted. There were no objections to the motion. **The motion carried by unanimous consent.**

AGENDA APPROVAL

The agenda for the day was reviewed. A motion was made by Zoe Olson and seconded by Tania Diaz to approve the agenda as submitted. There were no objections to the motion. **The motion carried by unanimous consent.**

OPEN MEETINGS ACT

Judy Nichelson stated that the meeting was an open meeting, and the Open Meetings Law was posted.

PUBLIC COMMENT

No public comment was shared.

ANNUAL DECLARATION OF CONFLICT OF INTEREST

Keri Bennett reviewed the requirement of members to annually declare conflict of interest. Members must annually declare any conflict of interest. Judy Nichelson asked members to make their declarations:

- Tiffany Armstrong declared Madonna Rehabilitation.
- Emaly Ball declared Nebraska Injured Brain Network & Independent Rising.
- Jerry Bryan declared no conflicts of interest.
- Penny Clark declared no conflicts of interest.
- Ashley Davis declared Quality Living Inc.
- Tania Diaz declared no conflicts of interest
- Joni Dulaney declared no conflicts of interest.
- Jo Gunderson declared no conflicts of interest.
- Randall Jones declared no conflicts of interest.
- Carla Lasley declared no conflicts of interest.
- Brooke Murtaugh declared Madonna Rehabilitation.
- Judy Nichelson declared Nebraska Injured Brain Network.
- Peg Ogea-Ginsburg declared no conflicts of interest.
- Zoe Olson declared no conflicts of interest.
- Peggy Reisher declared the Brain Injury Alliance of Nebraska.
- Larry Roos declared no conflicts of interest.
- Shawna Thompson declared no conflicts of interest.
- Frank Velinsky declared no conflicts of interest.

Absent members will be contacted via e-mail for declaration of conflict of interest.

Council members not in attendance at the March 12th council meeting reported the following conflicts of interests electronically.

- Tim Burton did not respond
- Karen Housman declared the Department of Health and Human Services.
- Dale Johannes declared Tabitha Nursing and Rehabilitation.
- Sarvinoz Kadyrova declared Nebraska Injured Brain Network.
- Amy Levering declared no conflicts of interest.

2020 TBI REGISTRY REPORT

Andrew Ngochoch shared data from 2015-2019 including frequency of cases, age-adjusted TBI rate, admission type, primary payer, TBI ED visit rates and discussed TBI inclusion criteria. Andrew reviewed the diagnosis codes change in 2015. Andrew reported the average number of TBI cases was 13,850 cases per year. Andrew reported 59% of TBI cases were admitted as emergency department cases. TBI emergency department visits were highest in September among pediatric patients. Patients 65+ years reported the highest inpatient rates; the rates have been increasing from 2015 to 2018. Among adults, inpatient rates were highest between June and September. 48% of TBI inpatients had a length of stay of 3 days or less. The median length of stay for pediatric days was two days. 90.5% of patients who had a TBI related emergency department visits were discharged home or self-care. Close to 49% of TBI inpatients were discharged home or self-care. Panhandle Public Health Department reported the highest rates of TBI. Falls were the leading cause of TBIs. The median age of a fall patient was 57 years. The median age of a patient who sustained a struck by/against injury was 15 years. Intentional injuries accounted for approximately 4.8% of TBI cases. The majority of TBI's sustained in motor vehicle traffic accidents involved the vehicle occupants. 44% of TBI inpatients were diagnosed with intracranial injuries; 57% of the patients were 65 years or older. Slightly over 69,000 TBI cases were reported between 2015-2019 in Nebraska. A severe TBI not only impacts the life of an individual and their family, but it also has a large

societal and economic toll. Andrew summarized TBI Prevention tips. Andrew shared he will forward the report to council members for review. Randall Jones asked in regard to the huge increase in the 85+ age group and large group between 2018-2019 asking what may have caused this anomaly if it was a reporting issue, Andrew shared he will need to look further into the data to see what may have caused this. Peggy Reisher asked regarding the younger category in the struck by/against if these were sports injuries or if it is broken down further with specifics of cause of injury. Andrew shared it does include sports injuries and he will look further into how the injuries occurred. Frank Velinsky inquired regarding data from persons incarcerated. Andrew reported they do not capture that data unless they can track where they were discharged, and he will look more into that data. Andrew shared the majority of Nebraska hospitals are required to report this data based on statutes, but this needs to be looked into further in terms of clinics, psychiatrists and private practices are not necessarily included in the report. Keri Bennett shared knowing who all is reporting and how the BIAC could encourage better reporting would be very useful information. Andrew and council members discussed the lack of reporting regarding race/ethnicity in the data and possible strategies to increase that reporting. Judy Nicholson discussed the diagnosis of intracranial injury is a different way to look at labeling traumatic brain injury. Judy discussed areas where she believed there to be misreporting. Judy noted that the word “severe” should be removed from TBI impact as all TBI have a large impact whether, mild, moderate, or severe, Andrew removed severe from the summary page.

ACL STAKEHOLDER DAYS – CONGRESSIONAL BI TASK FORCE AWARENESS DAY

Keri Bennett discussed the links she has shared with the council in the past to join the ACL Stakeholder Tuesdays as well as last month’s BI Task Force Awareness Day. Keri asked for input from any members who were able to participate. Peggy Reisher shared she sat in on the Congressional Day, stating she felt it was very good, focusing a lot on Covid. Keri Bennett shared she felt the briefing was much more informal which she felt was great and had a lot more participants than in the past. Keri noted she will resend the Stakeholder Tuesday notices if members would like to register. Judy Nicholson shared they were able to have a phone call with Deb Fisher and a representative from Don Bacon’s office, stating she felt the calls went well and they are very interested in brain injury. Judy stated they will be continuing contact with Don Bacon’s office and she is happy with how receptive his office has been. Peggy Reisher reported she also reached out to Jeff Fortenberry’s office. Keri shared NASHIA did reach out to Adrian Smith’s office and Ben Sasse’s but they were not successful in scheduling meetings.

2020 NEEDS SURVEY RESULTS

Will Schmeackle reviewed results from three unique needs assessment surveys. Will reported we have to be cautious with the results as there were not many respondents resulting in a small sample size. Key findings for individuals living with a brain injury included the vast majority experience current or past behavioral health issues with only 7% reporting no experience of behavioral health issues. Will reviewed services accessed for behavioral health and wellbeing with only 14% reporting they have not accessed any services, 66.7% have accessed mental health counseling. The number one barrier to obtaining behavioral health was reported as providers do not understand brain injury. Key findings for family members included nearly all experience emotional stress, but relatively few have accessed mental health services. 80% experience emotional stress in role as family member and/or caregiver of an individual with a brain injury. Key findings for behavioral health providers included low levels of awareness were reported by providers in the areas of behavioral health resources specifically for those with brain injury. About half of providers screen individuals informally for a lifetime history of potential brain injury. Most providers report they treat individuals with injured brains. Most providers, 74% are interested in participating in training on the impact of brain injury and behavioral health. The most common barriers reported by providers were knowing appropriate referral sources and lack of training for staff. Ashley Davis shared as a mental health provider she would be interested to know who had brain injury training in their counseling education program stating she did not receive any in her education experience discussing there is a lack of information in everything stating you have to be very interested in something to seek out

training and additional education in any area. Ashley also discussed as a caregiver you have so many things to balance there is not time to get counseling or mental health services for yourself. Peggy Reisher shared in April they are offering five different 90 minute trainings in partnership with DHHS where they hope the free CEUs will inform additional providers. Frank Velinsky discussed the need to approach provider training with caution be careful to define who needs to be trained between the medical community versus domestic service providers noting this needs to be clear as it can derail a good program. Judy Nichelson commented there is a difference between brain injury and living with an injured brain sharing book knowledge does not educate on what is always there when living with an injury that cannot be turned off and is always there affecting every aspect of life. Keri Bennett stated she believes the council should take time to digest the full report and then discuss and develop strategies of what to do with the data. Will stated he is willing to work with anyone wanting to dive into the data further. Chris Stewart asked regionally was there a common area providers were responding from, Will stated they were from a good variation throughout the state.

TBI GRANT FUNDING FORECAST

Keri Bennett reported the current grant cycle ends May 31, 2021 sharing they will be requesting a no cost extension to continue using the remaining grant funds into the next year. Keri shared they have had success with the extension in the past. The new funding announcement has not been released yet noting in the past they have begun writing by this time. Keri shared they have heard there have been delays in a lot of grant programs due to the change of administration. Keri shared she checks daily for the grant announcement and once it is announced they typically have a 60-day application window. Keri shared they do not know how long the grant cycle will be; stating in the past it has been 3 years but many lobbied to increase the grant cycle up to 5 years. The new start date will likely be July 1 versus June 1 creating a gap month. The new funding ceiling amount is anticipated to be lower than the past, Keri discussed the federal amount with a 50% VR state match. Keri shared she has some priorities asking for council feedback, the statewide vision and 2020 needs survey and VRs combined state plan, and Olmstead plan and where we are with our current plan to identify these possible priorities.

Primary priority one would be to continue building the network capacity with NBIN as they would need to continue with the third year as it was initially established.

Number two, doing a good job of implementing and evaluating a peer to peer support pilot sharing she sees a lot of potential in that pilot program.

Number three, employment for people with brain injury, increasing training and supports to increase employment for individuals with brain injury.

Keri asked for council input if they support these priorities. Frank Velinsky discussed the three priorities complement each other and asked if any areas of work will be cut or lost with the decrease of funding. Keri shared that no nothing is off the table completely. Tiffany Armstrong asked with the ACL grant funds if there is a report of what has been delivered and accomplished with past funds, Keri replied most of the ACL reports are available on the website which are completed every six months as well as reports done by Will. Keri stated she will send the reports via email in PDF form. Peggy stated it will be nice to measure the value of outcomes with the amount of funding used to determine what would be best going forward. Keri replied in the reporting they do not specify the exact spending per project but can share that from contracts. Keri shared she will send a follow-up email with this information following the meeting. Keri shared she may be requesting some council or committee meetings for input and work as the goals and objectives will need to be developed. Keri discussed she anticipates the same grant requirements as they have had from the past grant cycle including the state plan, annual summit, BIAC, registry and additional infrastructure activities that have always been included with the grant.

BRAIN INJURY TRUST FUND UPDATE

Peggy Reisher reported the committee has been established and met three times, stating bylaws have been established and they will be meeting again the end of March. Peggy shared they are in discussion with UNMC regarding what technical support they will be providing the committee moving forward. Peggy

shared trust fund dollars became available July 15 and the Governor had 90 days+ to appoint the committee so they did not have a committee to convene until December. Frank asked how he could see the committee make-up and any minutes. Peggy shared she will send a copy of the roster to members. Frank asked how the dispersal of dollars will be defined, Peggy reported this is what the committee needs to determine and what the priorities are. Peggy shared the legislation outlined what the priorities are and shared those with the council. 1. Resource Facilitation 2. Voluntary Training 3. Brain Injury Registry Follow-up 4. Public awareness 5. Collecting data & assessing needs 6. Supporting research. Frank asked if Peggy feels confident that these needs can be addressed across the state not just in the eastern portion of the state. Peggy shared there are representatives from across the state and representing all three congressional districts. Peggy shared there is a link from UNMCs website with the public minutes she will share with the council. Judy Nicholson shared she hopes the trust fund committee will find that many different entities can have some of the trust fund money.

NEW BIAC MEMBER TOOLKIT – BIAC MENTOR PROGRAM

Keri Bennett reported that Tresa summarized the toolkit and distributed to council members. Keri shared there are 20 or 21 different components and documents about brain injury and the council. Keri shared right now the NASHIA documents are in a Google folder which they are working to get on to the website to make it interactive and engaging, which will hopefully be completed over the next couple of months. Keri shared in the meantime mentors/mentees can access from the Google folder. Keri hopes for the future once the materials are available to the public online it will increase interest in the council. Keri shared next week Tresa will be sending out an email looking to recruit veteran BIAC members to become mentors for new council members and then later a survey for any newer council members interested in having a council mentor. Training will be scheduled in April for mentors and then in May the mentor/mentee pairs to begin working through materials and then working together prior to council meetings working together for 11 months as a trial of this new program for the council.

COMMITTEE REPORTS

Judy Nicholson discussed written committee reports which were provide via email. Judy asked if there were any questions regarding the reports. Network Capacity Building committee discussed by Emaly Ball with NBIN have submitted their proposal for phases 2 and 3 of the peer-to-peer support project which has been the main focus over the last few months. Emaly shared congratulations to Judy and the North Platte support group who received a proclamation for Brain Injury Awareness Day from the Mayor. Emaly discussed progress for NBIN's website is moving along well and will become a great resource for the public as well as use by state chapters. Emaly discussed chapter meetings in the future they would like to continue having a virtual option available with all chapters. Keri Bennett shared the peer-to-peer support program NBIN completed phase one and have submitted their proposal for phases two and three and this will be part of the no cost extension. Peggy Reisher shared they will welcome more individuals to the committee for expansion, let her or Keri know if you are able to join the peer-to-peer support committee.

NEW BUSINESS

Peggy Reisher shared the Brain Injury Conference is next Thursday and Friday and anyone interested can still register. Emaly Ball shared with the combined efforts of VR and NBIN they have launched their learning communities which will be provided via GoToMeeting over seven months with varying topics. Contact Emaly for links if interested in registering.

ADJOURN

The next meeting is scheduled for June 11, 2021. The meeting adjourned at 12:32p.m. with a motion made by Peggy Reisher and seconded by Frank Velinsky. There were no objections to the motion. **The motion carried by unanimous consent.**