

Officers

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Jim Vyhnak

Vice-Chair:
Position Vacant

Secretary:
Position Vacant

TBI Staff:
Adele Edelman
Erin Weaver
Glen McClintock
Al Urpsis
Samantha Baraw
Jane Culver

TBI ADVISORY BOARD MEETING
February 10, 2009
Stanley Hall Waterbury Office Complex

In Attendance: Brian Ashley, Bryan Dague, Adele Edleman Erin Weaver, Jim Vyhnak, Todd Lefkoe, Maureen Mayo, Al Urpsis, Glen McClintock, Trevor Squirrell, Barbara Prine for Nancy Breiden

Guests: Dr. Thomas Simpatico, James Fleshman & Kevin Burke

Notetaker: Jane Culver

Call to Order – 10:10 AM

Introductions and Announcements

- Jim Vyhnak was introduced as the new board chair replacing Diane Bogdan who stepped down because of a job conflict.
- Dr. Tom Simpatico and Dr. Deborah Black have agreed to join the TBI Advisory Board as consultants.
- Addition to the agenda - Quality Assurance
- Advisory Board meeting minutes for 11/4/2008 were accepted as written.
- Steering Committee meeting minutes for 1/27/2009 were accepted as written.

Updates

State TBI Program Update

- The TBI program is plugging away despite budget cuts. The program is currently 9% under budget. There is a possibility that for the rest of FY09 there will be a 4% rate cut across the board for all programs. State wide budget cuts are continuing with a proposed cut of 37 positions in the DAIL division. The Federal Economic Stimulus package may help but talks are continuing.
- The State TBI Program has done at least 300 consultations on top of providing regular services to 67 people.
- There are three out of state TBI clients returning to Vermont.
- Dr. Lefkoe is consulting with TBI clients in nursing homes trying to transition them out.
- New TBI providers – NCSS is now active; HCRS in Springfield is almost approved and UCS in Bennington is ready to provide services but is waiting for a Medicaid provider number.

TBI Quality Assurance Update

- The draft of the TBI Quality review process was completed over 3 months. It was a collaborative process which collected and utilized information from providers and families.
- The new review process system will continually monitor services offered to individuals with TBI. It will utilize TBI Consumer Outcomes and Indicators. The

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review process also offers feedback for system improvement and identifying promising practices to be shared statewide.

- The review process is completed within an 18 month cycle. On-Site review will be a one day review looking at compliance with TBI Program Standards. Program service review will be conducted over the course of one year with the focus on the quality of services received by TBI participants based on the TBI Consumer outcomes and indicators using observation; review of required documentation; and discussion with individuals receiving services and with TBI provider staff.

Vermont Brain Injury Association Update

- 2009 TBI Conference is scheduled for October 22nd at the Sheraton in Burlington.
- Fund raiser – Walk for Thought will happen on Saturday, June 20th at Oak Ledge Park.
- Ted Stachulski is revamping the BIA-VT website. Please look at it and pass along your comments to the BIA-VT.
- The BIA-VT staff attended the TBI rally at the State House and chatted with legislators and the governor. The previous week Trevor gave a talk to House.
- New faces at the BIA-VT - Megan Wright is the new Information and Referral Specialist and Ted Stachulski has been hired as the Veterans Outreach worker.
- In 2009, in partnership with the State, the BIA-VT is developing a new case management program based on best practices of the New Hampshire TBI program. Neuro Resource Facilitators will be hired in targeted areas in Rutland and Chittenden counties. The program will hopefully expand beyond veterans into the rest of the community.

Neuro Resource Facilitation System Development

- The NRF system is based on sound set of measurable outcomes.
- The process is underway for hiring a job developer jointly with Vocational Rehabilitation and the Vermont Association for Business Industry and Rehabilitation (VABIR). This position will provide education and support to Vermont businesses to support the return to work of veterans with TBI and trauma related issues. This is following through with the goals of the Governor's Summit on Employing People with Disabilities and will provide additional placement down the road.
- Also being recruited is a Neuro Resource Facilitator in the Rutland area. This person will meet with providers in the Rutland area to help meet existing needs in that community and create collaborations with providers.
- The Leahy earmark of \$200,000 a year for 4 years will allow expansion of Neuro Resource Facilitation throughout the state creating linkages in the community and avoiding corrections.
- In addition a collaboration is being developed with the Department of Mental Health through a SAMHSA grant project overseen by Dr. Tom Simpatico. Plans

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include hiring an NRF Facilitator in Chittenden County who will also be a half time court liaison for the SAMHSA "MHISSION" Project.

Dr. Tom Simpatico provides an Overview of the MHISSION Project

- Dr. Simpatico has SAMSHA funding (2.5 million over 3 years) to create a mental health information system. This system would identify and target clinical populations (veterans and others) with trauma, i.e. TBI, other major mental illness, and substance abuse and divert them from corrections or help them while they are in the correctional system. The system would redirect them and keep them out of corrections by providing diversion and help.
- The identification piece would be used in the correctional and mental health systems where TBIs are often unidentified. It makes sense to identify people as soon as possible and to use a sequential intercept model at the initial emergency i.e. initial incarceration, or on release into community. If incarcerated it will line up tracks to better serve them in prison and better opportunities to linkages when being released into community.
- The diversion piece will allow them to access Mental Health courts, a voluntary process, and hopefully be redirected to appropriate treatment. This being created by John Coffin in Chittenden County. There needs to be a way to identify good candidates, someone to talk to them and give them choices i.e. conventional court, or go to specialty court and avoid corrections. This will bolster the capacity of courts to deal with those they can be effective with. Mental Health court will help people get hooked into services.
- Currently there are not enough services, resources or funding. There is also no good way of counting the load on these services or quantifying this for the legislature. What is the cost saving and how does it effect the big picture? Knowing this data will be a more compelling way to lobby the legislature for needed resources.
- This project will also create a web-based informational system in the Department of Corrections to make it easy to share pertinent information and provide consistent processing. It will also identify the cohort for the program.
- It is hoped that the new Chittenden County Neuro Resource Facilitator/TBI Court Liaison will fit a variety of needs. It will be a shared position with the court liaison helping to identify resources in the community. This position will be a key intercept point for keeping veterans and others out of corrections. It will help show a cause and effect relationship and also map resources that exist in the veteran and non-veteran world. This position will work with the Burlington and UVM police departments providing them with training around physical manifestations of various trauma and resources to help them understand what they might be encountering and ways of identifying veterans and others with TBI or other issues and ways they might provide intervention information. The purpose being to intervene on the front line to identify people and to provide other resources. The goal being to shunt them into more appropriate services.

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TBI Advisory Board – Where We Are Now

- Board issues – board development and subcommittees.
- Revised bylaws will be sent out. They have been flesh out to provide structure moving forward.
- Board members who have not attended meetings in past few years are being contacted to find out if they are still interested in serving on the board.
- Connections are being established with Veteran services. Clayton Clark will invite Dr. Lanier Summerall, Director of the TBI Clinic and Inpatient Unit at the VA Medical Center in White River Junction to join us at the next Advisory Board meeting in May.
- Dr. Simpatico and Dr. Deborah Black have agreed to be consultants to the TBI Advisory Board.
- We hope to develop Memorandums of Understanding with the VA to help identify veterans with TBI.
- There are Advisory Board openings for vice chair and secretary.
- Collaboration Committees were established to focus working with different systems to support the goals of the Advisory Board and to establish good collaboration with others providing TBI services.
 - Mental Health Collaboration Committee - Develop BIA-VT NRF Facilitator in Chittenden County as a shared position with the Department of Mental Health with funding through the Substance Abuse & Mental Health Services Administration (SAMHSA). Memorandum of Understanding will outline responsibilities to include liaison to veteran's court in addition to general NRF services. Will include focus to provide education on TBI to mental health professionals. **Outcome: The number of veterans with TBI diverted from corrections, the number of mental health professionals educated about TBI.**
 - Veteran Services Collaboration Committee – Identify and catalogue how veterans with TBI are identified (i.e. Benefits, VA, BIA). Create Memorandum of Understanding with the Veterans Administration to collect data on an ongoing basis. Support identification of BIA-VT as resource for this information. **Outcome: Identify longitudinal trends in the number of veterans identified with TBI.**
 - School Collaboration Committee –Develop and distribute networks to disseminate information regarding sports concussion issues to schools. Possible MOU can be developed with PHAT (Protect your Head on All Terrain) for educational activities. Support capacity of BIA-VT to support this activity on an ongoing basis. **Outcome: the number of materials and trainings provided to schools, % decrease in the number of sports related concussions.**
 - Medical Services Collaboration Committee – Develop ongoing distribution networks to disseminate information regarding TBI to Medical Service Providers (nurses, physicians, emergency medical technicians,

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etc.) and outreach to consumers receiving medical services (Shaken Baby Syndrome) in Medical Environments. Support capacity of BIA-VT to support this activity on an ongoing basis. **Outcome: The number of materials distributed, % decrease in TBI related deaths, shaken baby syndrome, etc.**

Guest Speaker Jim Fleshman with Kevin Burke from Lenny Burke's Farm. Thanks to Jim for sharing his TBI story so openly with us.

Meeting Adjourned at 11:50 AM

Respectfully submitted,
Jane Culver
TBI Administrative Assistant